State W	ell Report	
	Driller's Log	For Office Use Only:
Mississippi Departmen	Mississippi Department of Environmental Quality Aquifer:	
mit #· I ON OF A STATE TO I I I I I I I I I I I I I I I I I I		P-91
iller: Collected Well #: Well #: Well #: Well #: Well #: L. S. Elevation:		Well #:
Jackson, MS 39289-0631 L. S. Elevation:		
te drilling completed: (601)961-5210		<b></b>
(601)354	4-6938 (fax)	E-log #:
State Law requires that this report be prepared by the lice Department at the above address within 30 days of comp	ense holder responsible for t letion of drilling of the well	he work and filed with the or borehole.
Information on Well Owner		rehole Location
(Landowner if borehole is not for a water well)	210 22 16	60 20 130
Owner Name Coury Temple	Latitude: 31 ° 0 7 '6.8	" Longitude: 70° 54' 13.1"
Mailing Address: Hey 98	Method of Lat/Long (circle on	" Longitude: <u>90° 39 · 13.2</u> " e): Conventional Survey,
		GPS, Survey-grade GPS
Smithdule ms	¼¼ Se <b>2.5</b>	Twn SN Rng Sc
City State Zip Code	Distance Direction	Nearest Town
Telephone No. ()	Miles	of
7010pilotto 110. (	ii	
Well / Bore	hole Data	
Date drilling started: 8-16-17 Date drilling completed: 8-16-	07 Hole depth: 150	Hole diameter: 7"
Location of the source of any surface water used for drilling:		
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:		
Purpose of borehole (check one): Water WellGeotechnical/Geok	ogical Investigation Ground	Source Heat Pump
Seismic Survey Other (describe)	•	
Seismic Survey Other (describe)  If drilling is not related to water well construction, skip the remainder of this block		
Purpose of Well (check one): HomeIndustrial Public Supply Irrigation Fish Culture Other:		
If a flowing well, method of flow regulation: Valve Other (describe)		
Static Water Level: 88' feet above or below (circle one) land surface Date measured: 8-/6-07.		
Method of Measurement (circle one) teel tape electric tape air line other:		
Well depth: 150 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix		
Casing length: 130' feet Casing diameter: 4" inches Type of casing: Puc		
Screen length: 20' feet Screen diameter: 4'' inches Type of screen: Pro		
Screen slot size:		
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development		
Other (describe):		

Top of lap pipe or reduction in casing: \_\_\_\_\_\_feet. If telescoped or more than one screen, describe on next page

Form: OLWR-SWR-1A

If well telescopes, show depths on sketch.  Ground Level			
Ground Laver	Description of Formations Encountered	From (depth)	To (depth)
		Ground Level	
	day.	0	20
	Cluys	20	40
	crade.	40	80
1	Sond Forull	80	100
	they	100	120
	Sant.	120	130
	curse Sand	130	150
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1	<u> </u>		
If more than one screen, show location of each on ske	tch		<u> </u>
ketch the property layout and include the following: 1) th	e well location; 2) any permanent structures on the	property that may	<u>y</u>
ketch the property layout and include the following: 1) th aid in locating the well; 3) any roads, power		property that may	y II;
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Form: OLWR-SWR-1A
I certify that the well/borehole was drilled, constructed, and completed in accordance with all applicable requirements of the
Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state

Boad Extremed 029.	8-16-07	Bul Strange	
Print Name of Responsible Licensee and License No.	. Date	Signature of Licensee	

Landowner Name: Lary Temple.

## STATE WELL REPORT

## Part 2

Pump Installer's Completion Report
Mississippi Department of Environmental Quality

For Office Use Only:		
Aquifer:		
Well #: <b>P-96</b>		
Elevation:		

Driller: Fitzgrald well Sera	Office of Land and Water Resources		·
C. //	C. // .0		Well #: <b>P-9</b> 6
Date completed: 8/6-07	Jackson, MS 39289-0631		Wen#:
Control of the base of the bas	(601)961-5210 (601)354-6938 (fax)		Elevation:
Copy information from block on Part I	py information from block on Part 1 (601)354-6938 (1ax)		
This part of the report must be completed be report must be attached and both parts files	y a licensed water well of with the Department a	contractor or a licensed pump in at the above address within 30 do	staller. A copy of Part 1 of the
Well Owner Information			Location
Owner Name: Larry Temple		Latitude: 31022'6.8'	Longitude: 90° 39′ 13.2″
Mailing Address: Hwy 98		Method of Lat/Long (check one): Conventional Survey,	
′		LISGS anad Hand-held	GPS, Survey-grade GPS
. (11)		Time non	or o, ourvey-grade or o
Smithdule mg		1/41/4 Sec	T R
City State Zip Code			
		Distance Direction	Nearest Town
Telephone No. ()		Miles of	
Pump Type			ver Type
Circle one	_	Cir	rcle one
Air Lift Jet	Submersible	Diesel Engine Gasoline	Engine Natural Gas
Bucket Piston	Turbine	Electric Motor Hand	Tractor PTO
Centrifugal Rotary	Flowing Well	·	pecify):
Other (specify):	·	Horse Power Rating of Motor:	
Date Pump Installed: 8/16-07.		Setting Depth:	
Rated Pump Capacity: 35			2
Rated Pump Capacity: 35 C	Sallons Per Minute	Number of Stages:	<i>0</i>
		<u> </u>	
Pump Test Data	· · · · · · · · · · · · · · · · · · ·	Method of Mes	suring Water Level
-			cle one
Date Well Tested:			
Static Water Level (A):Feet B	elow Land Surface	Air Line Electric Meas	
Pumping Water Level (B):Feet Be	elow Land Surface	Other (specify):	
Drawdown [(B) – (A)]:Feet B	elow Land Surface	For flowing well, measured shu	nt in head:feet
Test Pumping Rate:	st Pumping Rate:Gallons Per Minute Well yieldedGPM with a drawdown of		_GPM with a drawdown of
Duration of Pump Test (minimum 4 hours): _	hours	feet after	hours of pumping

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.			
Brad Polzelald	de la constant de la	09.	Red Stralf
Print Name of Pump Installer	and Licens	e No. (if applicable)	Signature of Pump Installer

Form: OLWR-SWR-1B