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County: <u>Elant lin</u> , STATE WELL REPORT Permit #: Driller's Log	For Office Use Only: Well #: / 4/
Driller: Etzgerald well Servere Office of Land and Water Resources	Aquifer:
Poto drilling semplated 2-12-1C P.O. Box 2309	E-Log #:
Jackson, MS 39225-2309 (601)961-5210	
(601)360-0535 (fax)	
State Law requires that this report be prepared by the license holder responsible for the Department at the above address within 20 days of some level.	e work and filed with the
Department at the above address within 30 days of completion of drilling of the well of Well Owner Information Well or Bored	<i>r borehole.</i> nole Location
(Landowner I) borenole is not for a water well)	
Mailing Address: Boso child Rd Method of Lat/Long (check one)	: Conventional Survey,
USGS quad, Hand-held GP	S, Survey-grade GPS
Smoth dule MS NW 14 NW 14, Sec City State Zip Code	0 T 5N R 52
City State Zip Code	(Nearest Town)
Well / Borehole Data	
Date drilling started: $\frac{2}{12}$ - 15 Date drilling completed: $\frac{2}{12}$ Hole depth: $\frac{190}{12}$	Hole diameter:
Location of the source of any surface water used for drilling:	
Method of dosing and volume of Chlorine used in drilling and development:	
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron	Other:
Name of organization running log(s):	
Purpose of borehole (circle one): Water Well Geotechnical/Geological Investigation Gr	ound Source Heat Pump
Seismic Survey Other (describe)	
If drilling is not related to water well construction, skip the remainder of	f this block
Purpose of Well (circle all applicable): Home Industrial Public Supply Irrigation Fish	n Culture
f a flowing well, method of flow regulation: Valve Other (describe)	
tatic Water Level: 105 feet [above or below] land surface Date measured:	2-12-15
lethod of measurement (circle one): Steel tape Electric tape Air line Other (describe):	
Vell depth: <u>190</u> Well grouted to a depth of $\frac{10}{2}$ feet Type of grout (<i>circle one</i>): Net	at Cement) Bentonite Miv
asing length: <u>IFU</u> feet Casing diameter: 9" inches Type of costs	
creen length: <u>10</u> feet Screen diameter: <u>4"</u> inches Type of screen	
reen slot size: <u>-010</u> inches Setting depth: From <u>180</u> feet to 1	100'
The of completion (circle all and ischur)	
her (describe):	Natural Development ECEV
	<u>A 14</u> 20
op of lap pipe or reduction in casing:feet	山田 御田田 御

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and V Form: OI WR-SWR-14 (4/13)

The sketch below only required for water wells

If well telescopes, show depths on sketch. Ground Level

Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

₹.

Description of Formations Encountered	From (depth)	To (depth)
	Ground Level	
Clup	6	20
C. Konfi	20	40
side well	40	80
cluse	80	100
Sand	100	120
Cluy.	120	160
Sandi	160	180
(unte scondi	180	190
		ļ
	1	
		1

If more than one screen, show location of each on sketch

ch the property layout and include the following: 1) the well location; 2) any permanent structures on the property that may aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and the well; 4) a north arrow.	
DE touse'	
	Bogo (4th RJ
	Bert Jordun Ro
	2 20
Landowner Name: Larry Ritchie	

Form: OLWR-SWR-1A (04/08)

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

Date

laws.

AIAd Enterald.

2-12-15 OZG.

Red Styles Signature of Licensee

Print Name of Responsible Licensee and License No.

	STATE WELL REPORT	
County: FIANK W	Part 2	For Office Use Only:
Permit #:	Pump Installer's Completion Report	
Driller: Fotgevald well Serves	Mississippi Department of Environmental Quality Office of Land and Water Resources	well #: <u>P i 41</u>
Date completed: $2 - 12 - 15$	P.O. Box 2309	
Copy information from block on Part 1	Jackson, MS 39225-2309	Aquifer:
	(601)961-5210 (601) 360-0535 (fax)	
This part of the report must be complet	ted by a licensed water well contractor or a licensed pu	mp installer. A copy of Part 1
Well Owner Informat	h parts filed with the Department at the above address to Well i	within 30 days of well completion. .ocation
		ngitude: <u>90° 41′ 47.1″</u>
Owner Name: <u>Larry Ritchte</u> Mailing Address: <u>Boso chilo</u>	Ref. Method of Lat/Long (check one	 c): Conventional Survey,
<u> </u>		PS, Survey-grade GPS
Sm-Hdule MS City State	NW 16 NW 16 Car	10 T 5 N R 5E
City State	Zip Code	·
Telephone No. ()	(Distance) (Direction)	f(Nearest Town)
\sim	Pump Type (circle one)	
submersible Turbine Air Lift Centri	ifugal Flowing Well Jet Piston Rotary Other (de	scribe):
s This Pump (circle one): New Re		
	Power Type (circle one)	
lectric Diesel Gasoline Natural Gas	s Tractor PTO Windmill Other (describe):	
Horse Power Rating of Motor: $3/9$	Setting Depth:/ <u>30</u> feet Number	of Stages: 12
		Vi Juges/A
	Pump Test Data for Non Flowing Well	
Date Well Tested:	Pump Test Data for Non Flowing Well	um 4 hours): hours
Date Well Tested:	Pump Test Data for Non Flowing Well Duration of Pump Test (minim	um 4 hours): hours
Date Well Tested:	Pump Test Data for Non Flowing Well Duration of Pump Test (minim Duration of Pump Test (minim et Below Land Surface	um 4 hours): hours
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Date Well Tested: Fee Static Water Level (A): Fee Drawdown [(B) - (A)]: Method of measurement (circle one): So Measured shut in head:feet Meter Manufacturer: Meter Manufacturer: Meter Model Number/Name: Stallation Date: So This Meter (circle one): New Rep Important: By submitting the above in For agricultur HEREBY CERTIFY that the above stater	Pump Test Data for Non Flowing Well	um 4 hours): hours Feet Below Land Surface Gallons Per Minute hours of pumping