	State Well Report	
County: George	Part 1 – Driller's Log Mississippi Department of Environmental Quality	For Office Use Only:
Permit #:	Office of Land and Water Resources	Well #:
Driller: Michael S. Havard	P.O. Box 10631 Jackson, MS 39289-0631	L. S. Elevation:
Date drilling completed:	(601)961-5210 (601)354-6938 (fax)	E-log #:

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State Law requires that this report be prepared by the license holder responsible for the work and filed with the Department at the above address within 30 days of completion of drilling of the well or borehole.

Department at the above analess within 50 anys of comp				
Information on Well Owner	Well or Borehole Location			
(Landowner if borehole is not for a water well)	Latitude: 30 ° 51 ' 889" Longitude: 88° 40 ' 05 "			
Owner Name Chris Stude	Latitude: <u>SS</u> <u>S</u> S3 Method of Lat/Long (circle one): Conventional Survey,			
Mailing Address: 222 Havell Mill Rd	Method of Lat/Long (circle one): Conventional Survey,			
	USGS quad, dand-held GPS Survey-grade GPS			
	5 1/4 Mar K Sec 22 Twn T35 Rng R 7W			
Lucedak MS 39452				
City State Zip Code	Distance Direction Nearest Town			
Telephone No. (601) 508 - 9985				
Well / Bore	hole Data			
Date drilling started: 9-14-09 Date drilling completed: 9-14-	N9 Uala danthi 48 Uala diamatan 25			
Date drinning started.	Hole deput. The Hole diameter.			
Location of the source of any surface water used for drilling:				
Logs run (circle all applicable): <u>No log run</u> Electric Gamma Ray Name of organization running log(s):	Density Sonic Neutron Other:			
Purpose of borehole (check one): Water Well Geotechnical/Geole	ogical Investigation Ground Source Heat Pump			
Seismic Survey Other (<i>describe</i> If drilling is not related to water well construction)			
Purpose of Well (check one): Home Industrial Public Supply				
If a flowing well, method of flow regulation: Valve O	ther (describe)			
Static Water Level:feet above or below (circle one) I	and surface Date measured: 9-16.09			
Method of Measurement (circle one) steel tape	> air line other:			
Well depth: 98 Well grouted to a depth of 12 feet Type				
Casing length: 88 feet Casing diameter: 4 inches Type of casing: PVC 540 BE				
Screen length: <u>10</u> feet Screen diameter: <u>4</u>	inches Type of screen: WOP PUC			
Screen slot size: inches Setting depth: From	8 feet to 9 feet			
Type of completion (circle all applicable): Gravel packed Under	reamed Telescoped Open hole Natural Development			
Other (describe):				
Top of lap pipe or reduction in casing:feet. If tel				
	Form: OLWR-SWR-1A			

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F [G] Description of formations encountered must be provided for all

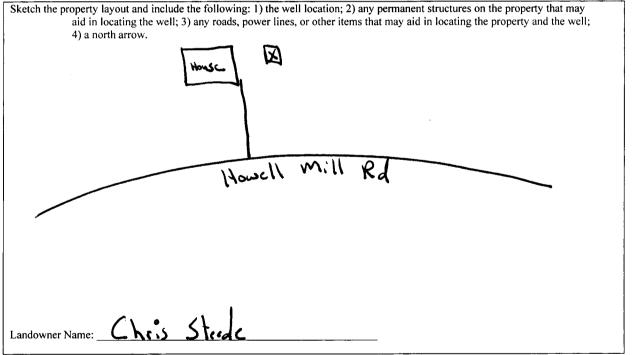
wells and boreholes, unless specifically exempted by regulations

The sketch below only required for water wells

If well telescopes, show depths on sketch. Ground Level_____

<u>s on sketen</u> .	Description of formations Encountered	From (depth)	To (depth)
	Topsand	Ground Level	8
	sand	8	45
	Clay	45	70
	Sand	70	98
		-	
	······································		1

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



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

laws. 0-673 10-16-09

___ <u>M 1</u> Signature of Licensee

Print Name of Responsible Licensee and License No.

Date

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	WELL REPORT
Permit #: Mississippi Depa Driller: M: chacl S. Haward Date completed: 9-16-39 Jack Copy information from block on Part 1 (6 This part of the report must be completed by a licensed water	Part 2 taller's Completion Report artment of Environmental Quality Land and Water Resources P.O. Box 10631 tsson, MS 39289-0631 (601)961-5210 501)354-6938 (fax) r well contractor or a licensed pump installer. A copy of Part 1 of the
report must be attached and both parts filed with the Departm Well Owner Information Owner Name: Chris Steele	Well Location Latitude: <u>N 30°51 .884</u> Longitude: <u>W 88°40.05</u>
Mailing Address: 222 Havell M:11 Rd <u>Lucidali MS 39452</u> City State Zip Code Telephone No. (601) 508-9985	Method of Lat/Long (check one): Conventional Survey, USGS quad, Hand-held GPS X, Survey-grade GPS ½ ½ Sec 2 T T S R R ½ ½ Sec 2 T T S R R Distance Direction Nearest Town L.S Miles of Lucrduk
Pump Type Circle one	Power Type Circle one
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston Turbine	Electric Motor Hand Tractor PTO
Centrifugal Rotary Flowing Well Other (specify):	Windmill Other (specify): Horse Power Rating of Motor:
Date Pump Installed:	Setting Depth:feet
Rated Pump Capacity: Gallons Per Minut	• • •
Pump Test Data Date Well Tested: 9-16-09 Static Water Level (A): 73 Feet Below Land Surfac Pumping Water Level (B): 75 Feet Below Land Surfac	Other (specify):
Drawdown [(B) – (A)]:7Feet Below Land Surface Test Pumping Rate:6allons Per Minute Duration of Pump Test (minimum 4 hours):hour	Well yielded GPM with a drawdown of
I HEREBY CERTIFY that the above statements are true to the Michaels Havers 0-673	best of my knowledge.

BY: OLWR

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