Part 2 never received 3/13 State W	/ell Report	
	Part 1	For Office Use Only:
	art 1 at of Environmental Quality	Aquifer:
Permit #: Office of Land	and Water Resources	well #: J- 59
Driller I TISPILITER ILEUSRY	Box 10631	
Jackson, P	4S 39289-0631 961-5210	L. S. Elevation:
(601)35	4-6938 (fax)	E-log #:
State Law requires that this report be prepared by the 30 days of completion of drilling of the well.	driller in detail and filed w	ith the Department within
Well Owner Information	Well	Location
Owner Name_Tyler Fuller	Latitude: <u>30 • 48 • 084</u>	" Longitude: <u>088° 48</u> , <u>558</u> "
Mailing Address: Broom(S School Rd	Method of Lat/Long (circle on	
		GPS Survey-grade GPS
Perkinston, MS 37573 City State Zip Code		8 Twn <u>735</u> Rng <u>R8</u> W
Telephone No. ()	Distance Direction $\underline{\mathcal{I}}$ Miles $\underline{\mathcal{S}}$	Nearest Town of Lucenste
Well	Data	
Purpose of Well (circle one) (Home) Industrial Public Supply		Othern
		Other:
Date well drilling started: Date Date		
If flowing, method of flow regulation: Valve Other (lescribe)	
Static Water Level:feet above or relow (circle one)	and surface Date measured:	11-10-06
Method of Measurement (circle one) steel tape electric tape		Dr.
Hole depth: <u>374</u> Well depth: <u>374</u>	Well grouted to a depth of	10 RECEIVED
Type of grout (circle one): Cement Bentonite Mix		10 RECEIVED DEC 1 1 2006
Type of grout (circle one): Cement Bentonite Mix Casing length: 359 feet Casing diameter: 3 Screen length: 15 feet Screen diameter: 3	inches Type of casing:	
		UC - VR
Screen slot size:	359 feet to 37	feetfeet
Type of completion (circle all applicable): Gravel packed Under	reamed Telescoped Open	hole Natural Development
	· · · · · · · · · · · · · · · · · · ·	
Top of lap pipe or reduction in casing:feet. If te	lescoped or more than one scre	en, describe on back of page
Logs run (circle all applicable) No log run Electric Gamma Ray	Density Sonic Neutron (Other:
Name of organization running log(s): NIA I certify that the well was drilled, constructed, and completed in	accordance with all annlicable	requirements of the Mississinni
Department of Environmental Quality and/or the Mississippi De		• • •
Tack Ridadall 0 1100	\bigcirc	
Print Name of Water Well Contractor and License No.		in Calgdin
This mane of water well Contractor and License No.	Sugnature of	Water Well Contractor

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J-59

If well telescopes please sketch below and show depths.

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Ground Level			Description of Forma	mons Encountered	From	To
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If more than one screen, show lo	cation of each on ske	etch				
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tch the property layout and includ	3) any roads nower	lines or other	; 2) any permanent str tems that may aid in h	uctures on the proper ocating the property a	rty that may and the well	
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tch the property layout and includ aid in locating the well; 4) indicate direction.	3) any roads nower	lines, or other	tems that may aid in l	uctures on the proper ocating the property a	rty that may and the well;	
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