2.1				
ort a never received 3/13 State Well Report		For Office Use Only:		
County: Grocol.	County: Greace Part 1			
IVIISSISSIPPI Department	Mississippi Department of Environmental Quality			
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Office of Land and Water Resources P.O. Box 10631			
Jackson, IV	Jackson, MS 39289-0631			
	(601)961-5210 (601)354-6938 (fax)			
State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.				
Well Owner Information	Well	Location		
Owner Name Jessica Dunaway	Latitude: 30 ° 47 , 95	" Longitude: 88° 51 '96 "		
Mailing Address: 10497 Seymout Drive	Method of Lat/Long (circle or	e): Conventional Survey, 57		
	USGS quad, Hand-held	GPS, Survey-grade GPS		
	NW 1/4 SW 1/4 Sec 10	Twn 715 Rng X13		
D'Oberville MS 39540 City State Zip Code	Distance Direction	35 9W		
	Hiles SW	of Benndale		
Telephone No. (228) 697 - 62 58				
Well Data				
Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other:				
Date well drilling started: 9-28-05 Date well drilling completed: 9-38-05				
If flowing, method of flow regulation: Valve Other (describe)				
Static Water Level: 98 feet above or below (circle one) land surface Date measured: 9-29-05				
Method of Measurement (circle one) steel tape electric tape air line other:				
Hole depth: 324 ft Well depth: 324 ft Well grouted to a depth of 17 feet				
Type of grout (circle one): Cement Bentonite Mix				
Casing length: 314 feet Casing diameter: 2	_inches Type of casing: _	PUL SYO		
Screen length: 10 feet Screen diameter: 2 inches Type of screen: wor full				
Screen slot size:inches Setting depth: From	314 feet to 3	24 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 telescoped or more than one screen, 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):				
I certify that the well was drilled, constructed, and completed in a		,		
Department of Environmental Quality and/or the Mississippi De	partment of Health regulation	s and state laws.		

0-673

Print Name of Water Well Contractor and License No.

Signature of Water Well Contractor

Ground Level

Description of Formations Encountered	From	To
Topsand	0	6
sand (med)	4	15
Clay	15	27
5:17	27	35
Sand (Cinc-med)	35	41
Clay	41	128
5111	158	136
Clay	134	145
S:14,	165	138
Clay	178	212
3:114	SB	231
Clay	231	275
Sand (Cine)	275	279
Clay	279	290
sand (sine)	290	302
Sand (med)	302	324

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

Sketch the property layout and include the following: 1) the well location; 2) any permanent structures on the property the aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and to 4) indicate direction.	nat may the well;
Brome School Rd	
Jag S well	
W well	
Landowner Name: Jessica Dunaway	

Signature of Water Well Contractor