•					
,	STATE V	WELL REPORT	77 O.00 XI O.1		
county: George	Part 1		For Office Use Only:		
Permit #:	Driller's Log Mississippi Department of Environmental Quality		well #:		
priller: Coostubler Wellsvc	Office of Land and Water Resources		Aquifer:		
Date drilling completed: 4-9-15	P.O. Box 2309 Jackson, MS 39225-2309		E-Log #:		
	J (4	601)961-5210			
	•	1)360-0535 (fax)	to an art and Glad with the		
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.					
Well Owner Information		Well or Borehole Location			
(Landowner if borehole is not for	r a water well)	Latitude: 30° 45' 11.46" Loi	ngitude:1 <u>188° 48' 11. 46"</u>		
Owner Name: Dusty Watts	-	Method of Lat/Long (check one): Conventional Survey,			
Mailing Address: Vestry Re	AD	USGS quad, Hand-held GPS, Survey-grade GPS			
		i '			
Livedale, Ms 39452		5E 14 5E 14, Sec 29 T 35 R 8W			
City State Lip code		8 Miles South of Beampha (Distance) (Direction) (Nearest Town)			
Telephone No. (<u>208)</u> 217-04	34	(Distance) (Direction)	(Nearest Town)		
	Well / E	Borehole Data	4 14		
Date drilling started. 4-9-15 Dat	e drilling completed	: <u>4-9-15</u> Hole depth: <u>95</u>	FT Hole diameter: #		
Location of the source of any surface water used for drilling: NA					
Method of dosing and volume of Chlorine used in drilling and development: Lgal per 1000 Srilling again will					
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 Ground Source Heat Pump					
Seis	mic Survey Other	(describe)			
If drilling is not related to water well construction, skip the remainder of this block					
Purpose of Well (circle all applicable): Home 'Industrial Public Supply Irrigation Fish Culture					
Other (describe):					
If a flowing well, method of flow regulation: Valve Other (describe)					
Static Water Level: 25feet [above_or_below] and surface Date measured: 4-9-15					
Method of measurement (circle one)	Method of measurement (circle one): Steel tape Electric tape (Air line) Other (describe):				
Well depth: 95 FT Well grouted to a depth of: 10 feet Type of grout (circle one): Neat Cement Bentonite Mix					
Casing length: 85 feet Casing diameter: inches Type of casing:					
Screen length: 10 feet Screen diameter: 4 inches Type of screen: 10					
Screen slot size:					

Type of completion (circle all applicable): Gravel packed

Top of lap pipe or reduction in casing: _

Other (describe):__

APR 2 0 2015

Form: OLWR-SWR-1A (4/13)

BY: OLWR

Natural Development

Open hole

Underreamed

_feet

If telescoped or more than one screen, describe on next page

Course Genral			For Office Use	Only:
County: George,			Well #: 5 100	
Permit #:		•	Well #:	
The sketch below only rec		Description of formations en and boreholes, unless specifi	countered must be provide cally exempted by regulati	ed for all wells lons
If well telescopes, show d	epths on sketch.	Description of Formations Enco	untered From (<i>depth</i>)	To (depth)
Ground Level		Brown Coarse Sans	w Peal Ground level	19
		Blue Clay	10 19	37
		Gray Fine Sand Blue Jay	. 30	23
		Gray Coarse San	83	95
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If more than one screen, sho	w location of each on sketch			
Sketch the property layout an	nd include the following:			
the well location any permanent structure	ures on the property that may a	aid in locating the well		
any roads, power lines north arrow	s, or other items that may aid in	n locating the property and the wel	ا ا	į
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	Parva			
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			<u>F</u>	
•			(N)	138
		Coppe	County (N)	3
		Gerif		/ 0
			_	/QP
Landowner Name: MIC	tutintte	JACKSON CONNTY		
Landowner Name: 100	111111111111111111111111111111111111111			
I HEREBY CERTIFY that the requirements of the Missis if applicable, and state la	 well/borehole was drilled, sippi Department of Enviror ws. 	constructed, and completed in nmental Quality and the Mississi		R .
Trob Ridad	fell MITO	4/13/15	A RILAR	ECENE
Print Name of Responsible	Licensee and License No.	Date	Signature of Licensee	ADD SEA OUT
· · · · · · · · · · · · · · · · · · ·		<i>y</i>	Form: OLW	R-SWR-1A (4/13)

STATE WELL REPORT

County: George Permit #: Driller US+Water WUI SVC Date completed: 4-9-15 Copy information from block on Part 1

Print Name of Pump Installer and License No. (if applicable)

Part 2

Pump Installer's Completion Report Mississippi Department of Environmental Quality Office of Land and Water Resources

P.O. Box 2309 Jackson, MS 39225-2309 (601)961-5210 (601) 360-0535 (fax)

For Office Use Only:				
Well #:				
Aquifer:				

(601)	360-0535 (fax)			
This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part 1				
of the report must be attached and both parts filed with the D Well Owner Information	epartment at the above address within 30 days of well completion. · Well Location			
Owner Name: DUSTY Watts	Latitude: 35 45 11.46" Longitude: 088 48 11.46"			
Mailing Address: Vestry Road	Method of Lat/Long (check one): Conventional Survey,			
	USGS quad, Hand-held GPS, Survey-grade GPS			
Lucedale, Ms 39452 City State Zip Code	55 4 55 4, Sec 29 T 35 R 3 W			
City State Zip Code				
Telephone No. (288) 217-0434	B Miles South of Boundale (Distance) (Direction) (Nearest Town)			
Pump Type (circle one)				
Submersible Turbine Air Lift Centrifugal Flowing Well	Jet Piston Rotary Other (describe):			
Date Pump Installed: 4-14-15 Rated Pump Capacity: Zo Gallons Per Minute				
Is This Pump (circle one): New Repaired Replacemen	nt ·			
Power Ty	De (circle one)			
Electric Diesel Gasoline Natural Gas Tractor PTO Win	dmill Other (<i>describe</i>):			
Horse Power Rating of Motor: 1111 Setting Dept	h: 60FT DP feet Number of Stages: 9.			
Pump Test Data for Non Flowing Well				
Date Well Tested: 4-14-15 Duration of Pump Test (minimum 4 hours): 6 hours				
Static Water Level (A): 25 Feet Below Land Surface Pumping Water Level (B): N/4 Feet Below Land Surface				
Drawdown [(B) - (A)]:Feet Below Land Surf	ace Test Pumping Rate: 22 Gallons Per Minute			
Method of measurement (circle one): Steel tape Electric ta	pe Air line Other (describe):			
Pump Test Date	a for Flowing Well			
Measured shut in head:feet.	NA			
Well yieldedGPM with a drawdown of	l feet afterhours of pumping			
Meter Installation				
Meter Manufacturer:	Meter Serial Number:			
Meter Model Number/Name:				
Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):				
Installation Date: Meter installed by:				
Is This Meter (circle one): New Repaired Replacement				
Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.				
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.				

Date

Form: OLWR-SWR-1B (4/13)

Signature of Purpo Installer