1		1 State Well Report	
	County: HArrison	Part 1 – Driller's Log	For Office Use Only:
	county.	Mississippi Department of Environmental Quality	Aquifer:
	Permit #:	Office of Land and Water Resources	Well #: C- 381
	Driller: 0 - 785	P.O. Box 10631	Well #:
		Jackson, MS 39289-0631	L. S. Elevation:
	Date drilling completed: 5-29-08	(601)961-5210	
		(601)354-6938 (fax)	E-log #:

<u>,</u>

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.

Information on Well Owner	Well or Borehole Location				
(Landowner if borehole is not for a water well)					
	Latitude: <u>30°35' '079</u> ' Longitude: <u>89°03'322'</u> 05 23				
Owner NameRoger_Lee					
Mailing Address: 13420	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS				
E. Wortham Rd.					
	1/4 Sec 26 Twn 55 Rng//w				
Saucier MS. 395-74 City State Zip Code					
City State Zip Code	Distance Direction Nearest Town Miles of				
Telephone No. ()	Willes 01				
Well / Bore	hole Data				
Date drilling started: 5-29 Date drilling completed: 5-29 Hole depth: 80 Hole diameter: 5"					
Date drilling started: Date drilling completed:	Hole depth: 80 Hole diameter: 3				
Location of the source of any surface water used for drilling:					
Method of dosing and volume of Chlorine used in drilling and devel					
Logs run (circle all applicatio): No log run Electric Gamma Ray	Density Sonic Neutron Other:				
Name of organization running log(s):					
Purpose of borehole (check one): Water Well Geotechnical/Geol	ogical Investigation Ground Source Heat Pump				
Seismic Survey Other (<i>describe</i>					
If drilling is not related to water well construction, skip the remainder of this block					
Purpose of Well (check one): HomeIndustrial Public Supply Irrigation Fish Culture Other:					
If a flowing well, method of flow regulation: Valve Other (describe)					
Static Water Level: <u>25</u> feet above releaver (circle one) land surface Date measured: <u>5-29</u>					
Method of Measurement (circle one) steel tape electric tape air line other:					
Well depth: <u>SO</u> Well grouted to a depth of <u>IS</u> feet Type of grout (circle one): Neat Cement Bentonite Mix					
Casing length: <u>40</u> feet Casing diameter: <u>3</u>	inches Type of casing:				
Screen length: 20 feet Screen diameter: 3	inches Type of screen:				
Screen slot size:OO6inches Setting depth: From	60 feet to feet				
Type of completion (circle all applicable): Gravel packed Unde	rreamed Telescoped Open hok Natural Developmen				
Other (describe):					
Top of lap pipe or reduction in casing:feet. If te	elescoped or more than one screen, describe on next page				
	Form: OLWR-SWR-1A				
	RECEIVED				

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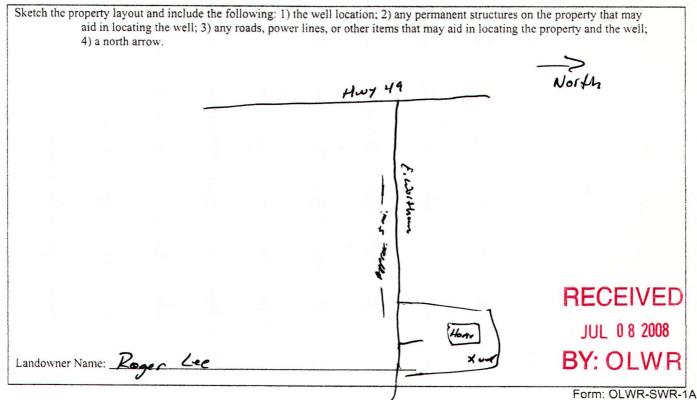
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The sketch below only required for water wells

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) T	o (depth)
Clay	Ground Level	15
Sand	15	40
Clay	40	60
Sand.	60	80
		_

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



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.

Date

MALVIN WAGNON 0-785 5-28-08

Print Name of Responsible Licensee and License No.

with wag

Signature of Licensee

STATE W	ELL REPORT
Permit #: Pump Installer Driller: D-47D Date completed: 6-208	at the above address within 30 days of well completion. Well Location Latitude: 20° 25°. 079′ Longitude: C9° 03, 377′ Method of Lat/Long (check one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS ¹ / ₄ ¹ / ₄ Sec T R
Telephone No. ()	Distance Direction Nearest TownMiles of
Pump Type Circle one Air Lift Jet Bucket Piston Centrifugal Rotary Flowing Well Other (specify): Date Pump Installed: 6-2-08 Rated Pump Capacity:	Power Type Circle one Diesel Engine Gasoline Engine Natural Gas Electric Motor Hand Tractor PTO Windmill Other (specify):
Pump Test Data Date Well Tested: $6 - 2 - 0 F$ Static Water Level (A): 25 Feet Below Land Surface Dumping Water Level (B): 75 Feet Below Land Surface Drawdown [(B) - (A)]: 45 Feet Below Land Surface Crest Pumping Rate: 15 Gallons Per Minute Duration of Pump Test (minimum 4 hours): 24 hours	Method of Measuring Water Level Circle one Air Line Electric Measuring Line Steel Tape Other (specify):
HEREBY CERTIFY that the above statements are true to the statements are tru	of my knowledge. Signature of Pump Installer Form: Presson 10

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