Harrison	04-4- XX	all Domont	Part anever received 3/13			
To all above	State wen keport		For Office Use Only:			
County: ACSON	Part 1 Mississippi Department of Environmental Quality		Aquifer:			
Permit #:	Office of Land and Water Resources		Well #: D- 75			
Driller Coast Water Well SRV.	P.O. Box 10631					
Date drilling completed: 8-2-00	Jackson, Mb 37207-0031		L. S. Elevation:			
Date drilling completed:	(601)961-5210 (601)354-6938 (fax)		E-log #:			
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 W		Wel	Location			
Owner Name BOODY Tros	Vair, SR.	Latitude: <u>30 • 36 • 46</u>				
Mailing Address: 11127 Oak Cr	St Dr. Method of Lat/Long (circle of		ne): Conventional Survey,			
D'Iberville, ſ	MS 3953 Q USGS quad (Hand-held		GPS) Survey-grade GPS			
		NW 15W 1/ Sec 28	Twn T55 Rng R 10W			
City Sta	City State Zip Code Distance Direction		Nearest Town			
Telephone No. (28) 297 - 6247 Sistance Miles 56 of SAUCYCE		of SAUCTER				
Well Data						
Purpose of Well (circle one Home Industrial Public Supply Irrigation Fish Culture Other:						
Date well drilling started:	-0 φ Date w	vell drilling completed:	-2-00			
If flowing, method of flow regulation: Valve Other (describe)						
Static Water Level: 145 feet above or below circle one) land surface Date measured:						
Method of Measurement (circle one) steel tape electric tape air line other:						
Hole depth: 402 Well depth: 402 Well grouted to a depth of 10 feet						
Type of grout (circle one): Cement Bentonite Mix						
Casing length: 447 feet Casing diameter: 2 inches Type of casing: PVC						
Screen length:						
Screen slot size:						
Type of completion (circle all applicable): Gravel packed Underreamed 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): Name of organization running log(s): Name of organization running log(s): I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi						
Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.						
			DEOMINE			
Jack Ridgaell U-47	12	- Jack	RidgelistECENED			
Print Name of Water Well Contractor and	License No.	/Signature of	Water Well Contractor AUC 25 113			

If well telescopes please sketch below and show depths.

Ground Level		
		_

Description of Formations Encountered	LIOIII _	10
TOO SOIL		
NONO CLOUD		22
Carried College College	212	3.0
Brown warse sand	α	2.4
orange clau	84	HU
Pile clay wistreaks of sand	LTID	1438
Gray course sand	438	Ula
Gray runse sarry	300	700
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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	he property that may
aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the p	property and the well;
4) indicate direction.	
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Proposed with	
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Fac	
Blackwell Farms Ro	
160	
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Landowner Name: BOBOU Trosclair, SR.	
Landowner Name: DODOU NOSCIAIT, S.R.	
J	

Signature of Water Well Contractor

RECEIVED

AUG 2 5 2003

BY: OLWR