•	STATE WELL DEDODT	138
County: NAQRISM	STATE WELL REPORT Part 1	For Office Use Only:
County: NNV21CV30	Driller's Log	Well #:
Permit #:	Mississippi Department of Environmental Quality	Aquifer:
Driller: M. SchvLJZ	Office of Land and Water Resources P.O. Box 2309	E-Log #:
Date drilling completed:	Jackson, MS 39225-2309	
	(601)961-5210 (601)360-0535 (fax)	
State Law requires that this report b	e prepared by the license holder responsible for t hin 30 days of completion of drilling of the well	the work and filed with the or borehole.
Well Owner Informatio	Well or Bore	chole Location
(Landowner if borehole is not for a	Dech JD. 32 DJWell or Bore Latitude: 30-32-2.67	ngitude: 891411
Owner Name: STASUNCLU	BC-32-2,61	89 - 14 - 13 e): Conventional Survey,
Mailing Address:		X
		GPS <u>/</u> , Survey-grade GPS
C-PT MS		$7 \times 65 \times R_{12}$
City State		of LDNG BEACHED
Telephone No. ()	(Distance) (Direction)	(Nearest Town) EN
	Well / Borehole Data	<' (1) 101 / 22 2019
Data drilling started: 11/19 Date (Well / Borehole Data drilling completed: 4 12/17 Hole depth: 63	S Hole diameter:
Date dritting started.	a ten used for drilling:	$S'_{\text{Hole diameter:}} = \frac{BYO}{BYO} + WR$
	ater used for drilling:	
	e used in drilling and development:	
	Electric Gamma Ray Density Sonic Neutr	
Name of organization running log(s):		
Purpose of borehole (circle one) Water	Well Geotechnical/Geological Investigation	Ground Source Heat Pump
	c Survey Other (<i>describe</i>)	
If drilling is not rela	ted to water well construction, skip the remainde	er of this block
Purpose of Well (circle all applicable):		Fish Culture
Other (describe): <u>ChVRC</u>	<u> </u>	
If a flowing well, method of flow regula	ation: Valve Other (<i>describe</i>)	1)14
Static Water Level: <u>8</u> feet	[above or below] land surface Date measure (circle one)	ed:
Method of measurement (circle one)	teel tape Electric tape Air line Other (describe	2):
	depth of: feet Type of grout (circle on	
	1 1 1 1	casing: PVZ
		$\mathbf{p}_{\mathbf{N}}$
	creen diameter: 2 inches Type o	if screen:
Screen slot size: \underline{vp}	Setting depth: Fromfeet	
Type of completion (circle all applicable	e): Gravel packed Underreamed Open hole	Natural Development
Other (describe):	、	
Top of lap pipe or reduction in casing:	feet	
If telesco	oped or more than one screen, describe on next p	page

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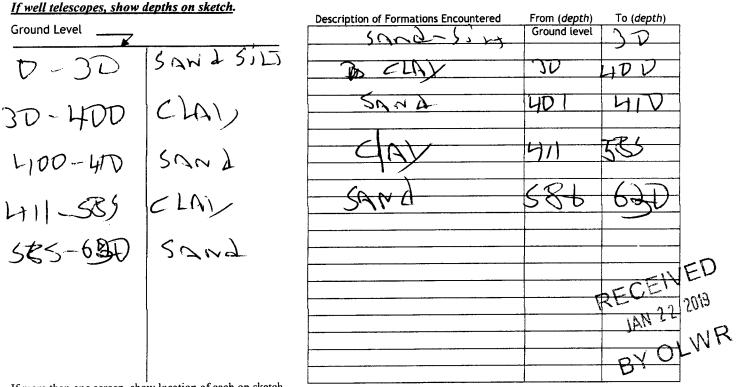
County:
Permit #:

For Office Use Only:		
Well #:	F529	

Description of formations encountered must be provided for all wells

and boreholes, unless specifically exempted by regulations

The sketch below only required for water wells



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

