	State W	ell Report	F . O. C I' . O . I .				
County: Haccison	Part 1 – I	Priller's Log	For Office Use Only:				
	Mississippi Departmen	Aquifer: 5384					
Permit #:	Office of Land a	Weil #:					
Driller: 0-785	P.O. Box 10631						
Date drilling completed: 6-10-10		IS 39289-0631 961-5210	L. S. Elevation:				
		4-6938 (fax)	E-log #:				
State Law requires that this repo Department at the above addres Information on Well	rt be prepared by the lic s within 30 days of comp	ense holder responsible for i letion of drilling of the well	or borehole.				
(Landowner if borehole is not)			rehole Location				
		Latitude: 30 - 25,536	35 Longitude 89° 19,002.				
Owner Name Brent Canne		2/ 1 2/ 2/ 2/ 2/ 2/ 2/ 2/ 2/ 2/ 2/ 2/ 2/ 2/					
Mailing Address: 28376		Method of Lat/Long (circle or					
W. Dubhison	D.I.		GPS, Survey-grade GPS				
2 55 (1 . 1.		N2 4 NW4 Sec 20	Twn 15 Rng 13 W				
Pass Christian Ms.	ate Zip Code	D:					
	F		Nearest Town of				
Telephone No. () 343 - 03	382		The second state of the se				
Well / Borehole Data							
Date drilling started: 6-10 Date drilling completed: 6-10 Hole depth: 290 Hole diameter: 5"							
Location of the source of any surface water used for drilling:							
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s):							
Purpose of borehole (check one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump							
Seismic Survey Other (describe)							
If drilling is not related to water well construction, skip the remainder of this block							
Purpose of Well (check one): Home	ndustrial Public Supply	Irrigation Fish Culture	Other:				
If a flowing well, method of flow regulation: Valve Other (describe)							
Static Water Level: 50 feet above of below (Orcle one) land surface Date measured: 6-10-10							
Method of Measurement (circle one)	teel tape electric tape	air line other:					
Well depth: 290 Well grouted to a depth of 10 feet. Type of grout (circle one). Neat Cement Bentonite Mix							
Casing length: 270 feet Casing diameter: 200' 70' inches Type of casing: PVC							
Screen length: 20 feet Screen	en diameter: 2	inches Type of screen:	PUC				
Screen slot size: .006 inches	Setting depth: From	270 feet to 29	Ofeet				
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open how Natural Development							
Other (describe):							

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

Top of lap pipe or reduction in casing: __

Form: OLWR-SWR-1A
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The sketch below only required for water well	The sketch	below	only	required	for	water	wells
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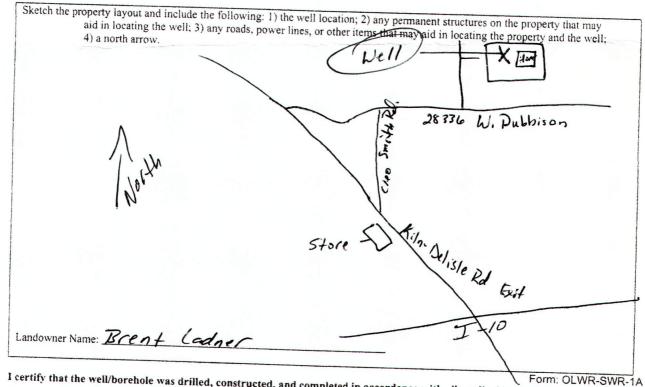
If well telescopes, show depths on sketch.

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)	To (depth)
Clay	Ground Level	60
Sanel	60	75
Clay	75	125
Sand	125	180
Clay	180	270
Sand	270	290

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.

MALVIN WAGNON 0-785 6-10-10

Print Name of Responsible Licensee and License No.

Date

Hel- Wagner

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BY: OIWR

STATE WELL REPORT County HACTISON Part 2 For Office Use Only: Pump Installer's Completion Report Permit = Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 10631 Jackson, MS 39289-0631 Well =: Date completed. 6-14-10 (601)961-5219 (601)354-6938 (fax) Convinformation from block on Part 1 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 Department at the above address within 30 days of well completion. Well Owner Information 43 Well Location Owner Name: Brent Calner Mailing Address Method of Lat Long (check one): Conventional Survey____. USGS quad ... Hand-held GPS ... Survey-grade GPS N& & NW 16 Sec 20 T75 Distance Direction Nearest Town 343-0882 Telephone No. () Pump Type Power Type Circle one Circle one Air Lift Submersible Diesel Engine Gaseline Eneme Natural Gas Bucket Piston Turbine Electric Motor Hand Tractor PTO Centrifugal Rotary Flowing Well Windmill Other (specify): Horse Power Rating of Motor: 1,5 Other (specify): Date Pump Installed: ___ 6-14-10 Setting Depth: 120 iset Rated Pump Capacity: 22 Gallons Per Minute Number of Stages: Pump Test Data Method of Measuring Water Level Circle one Date Well Tested: 6-14-10 Air Line Electric Measuring Line Steel Tape Static Water Level (A): 50 Feet Below Land Surface Other (specify): Pumping Water Level (B): 120 Feet Below Land Surface Drawdown [(B) - (A)]: 70 Feet Below Land Surface For flowing well, measured shut in head: ______fee: Test Pumping Rate: _____Gallons Per Minute Well yielded _____ GPM with a drawdown of Duration of Pump Test (minimum 4 hours): 24 hours feer after hours of pumping

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

Southern Well Service P759
Print Name of Pump Installer and License No. (if applicable)

Racia Dume
Significa of Plimp Installer

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