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FROM-LAND & WATER

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AUG 11 2008

BY: OLWR

County: Hinds
 Permit #: _____
 Driller: JOEY
 Date drilling completed: 7-31-08

State Well Report
Part 1 - Driller's Log
 Mississippi Department of Environmental Quality
 Office of Land and Water Resources
 P.O. Box 10631
 Jackson, MS 39289-0631
 (601)961-5210
 (601)354-6938 (fax)

For Office Use Only:
 Aquifer: _____
 Well #: Q-119
 L. S. Elevation: _____
 E-log #: _____

State Law requires that this report be prepared by the licensee 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 (Landowner if borehole is not for a water well)	Well or Borehole Location
Owner Name: <u>Lewis Smithhart</u>	Latitude: <u>32° 09' 45" N</u> Longitude: <u>90° 42' 03" W</u>
Mailing Address: <u>2628 Old Port Gibson Rd.</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS
<u>Utica, MS 39125</u>	<u>Sec 22 Twn 14 Rng 50</u>
City State Zip Code	Distance Direction Nearest Town
Telephone No. <u>(601) 932-0400</u>	<u>6.3 Miles S.W. of Utica</u>
<u>Hermetic Rush Cont. Keith Key</u>	
Well / Borehole Data	
Date drilling started: <u>7-30-08</u> Date drilling completed: <u>7-31-08</u> Hole depth: <u>225 ft.</u> Hole diameter: <u>4 3/4</u>	
Location of the source of any surface water used for drilling: _____	
Method of dosing and volume of Chlorine used in drilling and development: _____	
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 _____ <u>Ground Source Heat Pump</u> _____	
Seismic Survey _____ Other (describe) _____	
<i>(If drilling is not related to water well construction, skip the remainder of this block)</i>	
Purpose of Well (check one): Home _____ Industrial _____ Public Supply _____ Irrigation _____ Fish Culture _____ Other: _____	
If a flowing well, method of flow regulation: Valve _____ Other (describe) _____	
Static Water Level: _____ feet above or below (circle one) land surface Date measured: _____	
Method of Measurement (circle one) steel tape electric tape air line other: _____	
Well depth: _____ Well grouted to a depth of _____ feet Type of grout (circle one): Neat Cement Bentonite Mix	
Casing length: _____ feet Casing diameter: _____ inches Type of casing: _____	
Screen length: _____ feet Screen diameter: _____ inches Type of screen: _____	
Screen slot size: _____ inches Setting depth: From _____ feet to _____ feet	
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 <i>(If telescoped or more than one screen, describe on next page)</i>	

