

State Well Report Part I - 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)

County: Holmes
 Permit #: _____
 Driller: David Canady
 Date drilling completed: 10-14-05

For Office Use Only:
 Aquifer: _____
 Well #: E-19
 U.S. Elevation: _____
 E-log #: _____

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 <i>(Landowner if borehole is not for a water well)</i>	Well or Borehole Location
Owner Name: <u>Lebanon Water Association</u>	Latitude: <u>N 33° 13' 59"</u> Longitude: <u>W 89° 53' 44"</u>
Mailing Address: <u>P.O. Box 239</u> <u>2 Court Square</u> <u>Lexington MS 39095</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u> USGS quad, Hand-held GPS, Survey-grade GPS
Telephone No. () _____	<u>1/4</u> Sec <u>16</u> Twn <u>16N</u> Rng <u>4E</u>
	Distance Direction Nearest Town <u>6</u> Miles <u>West</u> of <u>West</u>

Well / Borehole Data

Date drilling started: 9-24-05 Date drilling completed: 10-14-05 Hole depth: 1763' Hole diameter: 12 1/4"

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): MS GEOLOGICAL SURVEY

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 _____ 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): _____

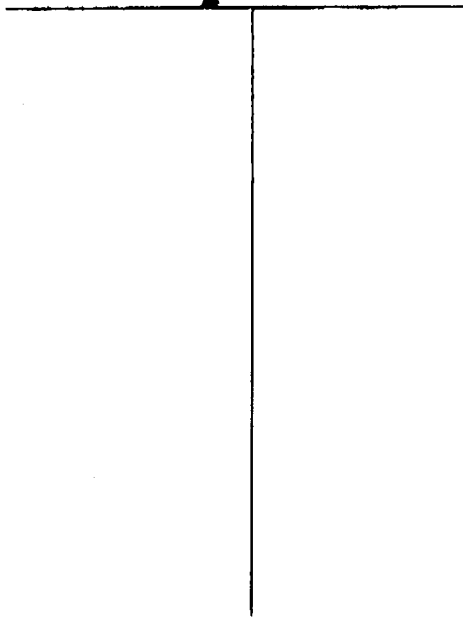
Top of lap pipe or reduction in casing: _____ feet *If telescoped or more than one screen, describe an next page*

E-19

The sketch below only required for water wells

If well telescopes, show depths on sketch

Ground Level

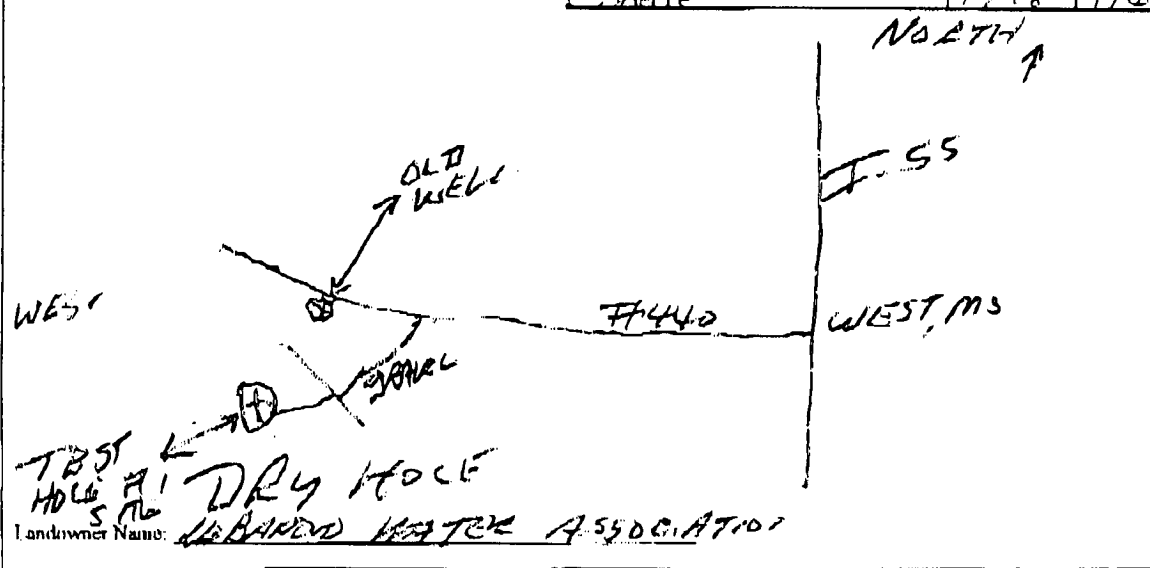


If more than one screen, show location of each on sketch

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)
Sand w/ Clay STRS	Ground Level	137
Clay	137	147
Shale w/ Clay STRS	147	173
Clay	173	188
Sand	188	387
Sand w/ Clay STRS	387	428
Shale w/ Clay STRS	428	480
Shale w/ Sand STRS	480	762
Sand w/ Shale STRS	762	794
Shale w/ Sand STRS	794	887
Shale w/ Clay STRS	887	950
Clay w/ Shale STRS	950	1077
Clay w/ Sand STRS	1077	1129
Fine Sand	1129	1132
Shale w/ Claye Sand STRS	1132	1170
Clay w/ Sandy Shale	1170	1233
Clay w/ Sand STRS	1233	1328
Clay	1328	1423
Clay w/ Sand STRS	1423	1454
Shale	1454	1516
Sandy Clay w/ Sand STRS	1516	1578
Sandy Clay w/ Shale STRS	1578	1639
Fine Sand	1639	1662
Shale	1662	1670
Shale w/ Sand STRS	1670	1710
Fine Sand & Lignite	1710	1726
Shale	1726	1730
Fine Sand	1730	1748
Shale	1748	1765

Sketch the property layout and include the following: 1) the well location; 2) any permanent structures on the property that may aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and the well; 4) a north arrow.



Form OLWR-SWR-1A

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.

Thomas G Christman 0-703

1/18/07

Thomas G Christman

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee