| County: Holmes | | Oriller's Log | roi Office ose only. |
|---|---|--|----------------------------|
| · | | t of Environmental Quality | Aquifer: |
| Permit #: | | and Water Resources | Well #: |
| Driller Office of Geology | | 30x 10631 1S 39289-0631 | |
| Date drilling completed: 3/4/04 | | 961-5210 | L. S. Elevation: |
| 777 | (601)35 | 4-6938 (fax) | E-log #: <u>J-0078</u> |
| Clada Y ann ann air an dioth di in ann an | | | |
| State Law requires that this report Department at the above address | t be prepared by the lic within 30 days of com | ense holder responsible for the | he work and filed with the |
| Information on Well O | | | rehole Location |
| (Landowner if borehole is not for | r a water well) | 77 00 11 | ZN COLLINA |
| Owner Name West Comp | will | Latitude: 33° 6/0', 4 3 | Congitude: 40° 14', 48" |
| Mailing Address: PD Box | 26 | Method of Lat/Long (circle on | e): Conventional Survey, |
| | | USGS quad, cland-held | |
| Oak Ridge L | A 7/264 | NE1/4 NE1/4 Sec 36 | _ Twn 15 W Rng / W |
| City State | Zip Code | Distance Direction 1.60 Miles Cary To | Nearest Town |
| Telephone No. () | ···· | 1.60 _ wines East_ | 11/1/25/00/ |
| | Well / Bore | hole Data | |
| Date drilling started: 3/3 Date dril | _ | | Hole diameter:5 |
| | | | |
| Location of the source of any surface water Method of dosing and volume of Chlorine | used in drilling and development | opment: 1 gul / 1800 | olc water |
| Logs run (circle all applicable): No log run Name of organization running log(s): | Flectric Mamma Ray | Density Sonia Nautron (| 1 |
| Purpose of borehole (check one): Water Wei | | | Source Heat Pump |
| Seismic St | urveyOther (describe) | skip the remainder of this blo | |
| | | | |
| Purpose of Well (check one): Home Inc | dustrial Public Supply | Irrigation Fish Culture | Other: |
| If a flowing well, method of flow regulation | : Valve Ot | her (describe) | |
| Static Water Level:feet abo | ve or below (circle one) la | and surface Date measured: | |
| Method of Measurement (circle one) stee | el tape electric tape | air line other: | |
| Well depth: Well grouted to a dept | th offeet Type | of grout (circle one): Neat Ceme | nt 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 Underro | eamed Telescoped Open h | ole Natural Development |
| | Other (describe): | | |

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

Top of lap pipe or reduction in casing: __

State Well Report

Form: OLWR-SWR-1A

RECEIVED
MAR 2 5 2009

BY: OLWR

From (depth) To (depth)
Ground Level 17

MAR 2 5 2019

BY: OLWF

<u>Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations</u>

Description of Formations Encountered

| | Clary | 225 | 245 |
|--|--|-----------------------------------|----------------|
| | 5/ 1/4 Sund | 245 | 265 |
| | CLB JETTE | 2/ =- | 3/0 |
| | English of the | -30-2 | 3/10 |
| | Jane | 5/0 | 1340 |
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| | | | |
| If more than one screen, show location of each on sketch | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| ndowner Name: | | | |
| ndowner Name: | | | |
| | | Form: OLWR- | SWR-1A |
| rtify that the well/borehole was drilled, constructed, and co | ompleted in accordance with all applicable req | quirements of t | he |
| rtify that the well/borehole was drilled, constructed, and co | ompleted in accordance with all applicable req | quirements of t | he |
| ndowner Name: | ompleted in accordance with all applicable req | quirements of t | he |
| rtify that the well/borehole was drilled, constructed, and cossissippi Department of Environmental Quality and the Mis | ompleted in accordance with all applicable requestissispi Department of Health regulations, if | quirements of the applicable, and | he |
| rtify that the well/borehole was drilled, constructed, and consisting the constructed of Environmental Quality and the Mis | ompleted in accordance with all applicable requisitions, if | quirements of the applicable, and | he |
| tify that the well/borehole was drilled, constructed, and consissippi Department of Environmental Quality and the Mis | ompleted in accordance with all applicable requestissispi Department of Health regulations, if | quirements of the applicable, and | he |

The sketch below only required for water wells

If well telescopes, show depths on sketch.

Ground Level.