county Humphrous
Permit # GW41040
Driller Shane Partrides
Date drilling completed: 5-4-06

## 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:	
Aquifor	
Well #: B- 238	
L. S. Elevation:	
E-log#;	

State Law requires that this report be prepared by the lice	ense holder responsible for the work and filed with the
Department at the above address within 30 days of comp Information on Well Owner (Landowner If burehule is not for a water well) Owner Name Dellewood James Mulling Address: P.O. Best 98	Well or Borehole Lucution  Latitude: N33° 12 '808" Longitude: 090 34 '121 "  Method of Lat/Long (circle one): Conventional Survey,  USGS quad, Uland-held GPS Survey-grade GPS
City State Zip Code Telephone No. (62) 265-5209	5W 4 5W 4 Sec 24 Twn 16 Rng 4 Rng 9
Well / Bore	
Date drilling started: 5-4-04 Date drilling completed: 5-4-0  Location of the source of any surface water used for drilling: Method of dozing and volume of Chlumne used in drilling and development.	LEAL
Logs run (circle all applicable) No log run Electric Gamma Ray Name of organization running log(s):	
Purpose of borchole (check one): Water Well Gentechnical/Gente	gical 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: ValveOt	ner (describe)
Static Water Level: 3   feet above of below circle one) la	nd surface Date meanired: 5/5/66
Method of Measurement (circle one) steel type cleetric tape	<i>j G</i>
Woll dopth: 132 Well grouted to a depth of 10 feet Type of	of grout (circle one) Neat Cement Bentonite Mix
Casing length: 82 feet Casing diameter: 16	
Screen length: 50 feet Screen diameter: 16	inches Type of screen: PVC
Gereen slot size: . 050 inches Setting depth: Prom	82 livel to 132 foot
ypc of completion (circle all applicable): Gravel packet Underre	
A/1/A	coped or more than one screen, describe on next page

P.3/3

MAY-10-2006 09:12 From:MID SOUTH WATER

6628431717

To:601 360 0535

B-238

_	ne sker	cu betan	ONLY FRAM	irea jor	water wells

If well telescopes, show depths on sketch.

Ground Lovel

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

Description of Formations Encountered	I rom (depth)	To (depth)
	Ground Level	
Clau	0	12
Claud	12	aa
C02.4	22	32
Clause	.32	13
Clark	La.	पिष ।
Fine Sahol	49	62
Bine Sand	53	62
Dine Sand	10.2	65
Fine Sand	\$55	72
Med. Sand.	72	73
Medium Sand	2	85
Course Sand	85	92
Course sand	92	102
Course France & Gravel	102	112
Course Sand & Havel	1112	122
Course Sand & Charel	122	1.32
	1	

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

Skeigh the property wid in 1) a n	A layout and include the following: 1) the well location; 2) may permanent structures on the property that may a locating the well, 3) and roads, power lines, or other items that may aid in locating the property and the well; sorth arrow.  BELZON  3 M.  3 M.  40.1300  BELZON  1 - M. C.  1 - M. C.
Landowner Name:	Bellewood Farms

Form: OLWR-SWR-1A I cortify 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 Hanth regulations, if applicable, and state laws.

Thomas G. Chrestman 0-103

Print Name of Responsible Licensee and License No.

Date

Signature of Licenses

P.2/4

MAY-18-2006 15:08 From:MID SOUTH WATER 6628431717

To:601 360 0535

STATE WELL REPORT				
County Humphoys	Part 2 Pump Installer's Completion Report Mississippi Department of Environmental Quality		For Office Use Only:	
Driller. Shows Partialge Date completed: 5-4-06	Office of Land and Water Resources P.O. Box 10634 Juckson, MS 39289-0634		Well #:	
Copy information from block on <u>Part I</u>		961-5210 4-6938 (fax)	Elevation:	
This part of the report must be completed report must be attached and both parts file	by a licensed water well o	contractor or a Heensed pump in t the above address within 30 da	staller, A copy of Part 1 of the	
Well Owner Informati		Well Location		
Owner Name: Bellowerd James  Moiling Address: P.O. Box 98		Latitude: N 33° 12' 808" Longitude: W090° 34' 121"  Method of Lat/Long (check one): Conventional Survey 07		
		USGS quad Hand-held (	GPS Survey-grade GPS	
City State Zip Code		5W% SW% Sec 24 T 16NR 4W		
Telephone No. (662) 265 - 521	09	Distance Direction Noarest Town  Miles of		
Pump Type Circle one			er Type cle one	
Aur Lift Jet	Submersible	Diesel Engine Gusuline	Engine Natural Gas	
Bucket Piston	Turbine	Electric Motor Hand	Tractor PTQ	
Centrifugal Rotary	Flowing Well	Windmill Other (s	pecify):	
Other (specify):		Horse Power Rating of Motor:	60	
Date Pump Installed: 5-16-	06	Setting Depth: 73 feet  Number of Stages. 2		
Rated Pump Capacity: 2006	Gallons Per Minute			
Pump Test Data		Method of Mass	uring Water Level	
Date Well Tested: Not tes	ted		cle one	
Static Water Level (A): 31 Foot E	Sclow Land Surface	Air Line Electric Measuring Line Steel Tape Other (specify):		
. 1	elow Land Surface			
Drinwdown [(B) - (A)]:Feet B	Below Land Surface	Fir flowing well, measured shuf	in head; NA feet	
Test Pumping Rate: NA	Gallons Per Minute	Well yielded NA	GPM with a drawdown of	
Duration of Pump Test (minimum 4 hours):	NA hours	foct afterhours of pumping		
			· A	
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.				
Print Name of Pump Installer and License No. (if applicable)  Signature of Pump Installer				
			Form: OLWR-SWR-1B	