	State We	ll Report	
Takan	Par	-	For Office Use Only:
County: Jackson	Mississippi Department o		Aquifer: <u>V354</u>
Permit #:	Office of Land and	Water Resources	Well #:
Drille COOST WATER WellSRV.		P.O. BOX 10031	
Date drilling completed: 4-13-11	Jackson, MS (601) 96		L. S. Elevation:
Date unning completed.	(601) 354-0		E-log #:
State Law requires that this rep 30 days of completion of drilling	ort be prepared by the dr	iller in detail and filed w	ith the Department within
Well Owner Informa		Well	Location
Owner Name Mar tha Willia	ums L	.atitude: <u>30. 40</u> 36.1	Longitude: 08 . 30, 38, 40
Mailing Address: 5880 Laran	nierlane In	Aethod of Lat/Long (circle on	e): Conventional Survey,
			GPS, Survey-grade GPS
Mosstoint, Ma City	<u>\$ 39562</u> te Zip Code		
Telephone No. 008 588 - 28		Distance Direction	Nearest Town of いれつミ
	Well Dat	ta	······································
Purpose of Well (circle one Home) Ind	ustrial Public Supply In	rrigation Fish Culture	Other:
Date well drilling started:4-13			
If flowing, method of flow regulation: Val	lve <u>NA</u> Other (desc	ribe)	
Static Water Level:50feet ab	•		
Method of Measurement (circle one) ` st	teel tape electric tape	air line other:	
Hole depth: <u>330 FT</u> Well dep		Well grouted to a depth of	10feet
Type of grout (circle one): Cement			
Casing length: 320 feet Casir	ng diameter: <u></u> i	nches Type of casing:	<u>pvc</u>
Screen length:feet Scre	en diameter:i	nches Type of screen:	PR
Screen slot size:	Setting depth: From	520feet to3.	30_feet
Type of completion (circle all applicable):	-	• •	hole Natural Development
	Other (describe):		
Top of lap pipe or reduction in casing:	N/Afeet. If telesc	xoped or more than one scre	en, describe on back of page
Logs run (circle all applicable): No log run		Density Sonic Neutron (Dther:
Name of organization running log(s):	V/A		· · · · · · · · · · · · · · · · · · ·
I certify that the well was drilled, constru-			
Department of Environmental Quality a	nd/or the Mississippi Depar	tment of Health regulations	and state laws.
Jack Kidgdell 0-	472	Sah p	Idel
Print Name of Water Well Contractor and	License No.	Signature of V	Nater Well Contractor

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L354

If well telescopes please sketch below and show depths.

Ground Level

	Description of Formations Encountered	From	To
 	Top Soil	+ 2	de
	Drange Clay	10-	2
	Drange coarse Saria	15	707
	prande clay	170	67
	Blue: Clay Wistreaks of Sand	187	374
		205	321
	Braycoanse-Sang	00	24
			<u> </u>
		+	
		-	
		1	
			<u> </u>
		+	
		+	
		1	
		+	
		1	
		1	
		1	

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

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) indicate direction. SectorA Lane SONORA ELLIS HAND And And Ro ~ Ø House x well LARANI Landowner Name: Martha Williams

Signature of Water Well Contractor

County Jackson Permit #: Drille: CASHWatter Well SRV Date completed:4-13-11	(601) 961-5210 (601) 354-6938 (fax)		Well #:
This report should be prepared by th installation of pump.	e pump installer in de	tail and filed with the Dep	artment within 50 days of the
Well Owner Information Owner Name: Martha Willi Mailing Address: 5880 Laram MOSS BINHA City State Telephone No. 208 588 - 286	ams ie Lane Is 39562- _{Zip Code}	Method of Lat/Long (ci USGS quad, <u>MU 1/2 MW</u> 1/4 Se Distance Direc	Well Location Well Location A. H. ongitude: 088 30' 3 rcle one): Conventional Survey, Hand-held GPS Survey-grade G ac_{29} Twn <u>T45</u> Rng \mathcal{R}_{-} tion Nearest Town ac_{10} of \mathcal{M}_{-}
Pump Type Circle one			Power Type Circle one
Air Lift Jet	Submersible	Diesel Engine (Gasoline Engine Natural
Bucket Piston	Turbine	Electric Motor	Hand Tractor F
Centrifugal Rotary Other (specify): Date Pump Installed: Rated Pump Capacity:	Flowing Well	Horse Power Rating of	Dther (specify): Motor: _/ HP T Drop Pipe_Teet Ə
Pump Test Data		Method	of Measuring Water Level
Date Well Tested: $4 - 14 - 14 - 14$ Static Water Level (A): 50 Feet F Pumping Water Level (B): $1 - 14 - 14$ Drawdown [(B) - (A)]: $1 - 14 - 14$ Feet F	Below Land Surface Below Land Surface Gallons Per Minute	Air Line Electri Other (specify): For flowing well, measu Well yielded6	Circle one c Measuring Line Steel Tap
I HEREBY CERTIFY that the above statem	ents are true to the best 72 .	of my knowledge.	hafden

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