County: JACKSON Permit #: Driller (<u>AST WATEY WELLSRV</u> . Date drilling completed: 10-11-06 State Law requires that this rep 30 days of completion of drilling Well Owner Inform: Owner Name RAMSEY HillS BC Mailing Address: JOE Batt	P Mississippi Departmen Office of Land a P.O. E Jackson, M (601) (601)354 ort be prepared by the g of the well. ation	Well Latitude: <u>30° 32</u> , 891 33 Method of Lat/Long (circle on	Location " Longitude: <u>188 • 49 · 844</u> . 58	
Vancleave MS City Sta Telephone No. (228) 826 - 27	_	<u>ろん) ¼ ろん)</u> ¼ Sec_6 Distance, Direction	Twn <u>T65</u> Rng <u>R84</u>	
	Well I	Data		
Well Data Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other:				
Logs run (circle all applicable): No log run Name of organization running log(s): I certify that the well was drilled, constr Department of Environmental Quality a	U/A ucted, and completed in a	ccordance with all applicable	requirements of the Mississippi	
Print Name of Water Well Contractor and	License No.	Signature of V	Water Well Contractor, 3 2006 BY: OLWB	

Start Start

5440

If well telescopes please sketch below and show depths.

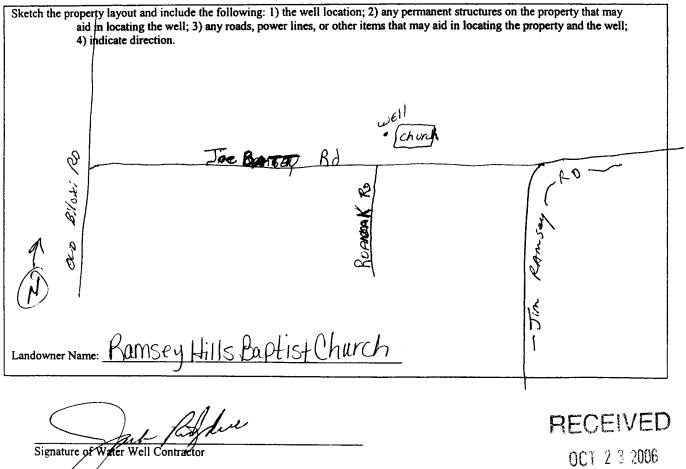
Ground Level

,X

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 Description of Formations Encountered TOP SOIL Prange, Clay Wellby W/Streaks Of Sand ray light Med. to Med. Sand ray Coarse, Sand W/Peagrave	From To 0 2 78 220 78 220 245 271 245 271

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



BY: OLWR

STATE W	VELL REPORT	
County: Tackson Pump Installe Permit #: Office of Landon 1	Part 2 er's Completion Report ment of Environmental Quality nd and Water Resources D. Box 10631 For Office Use Only: Aquifer: T 11110	
Driller USTWATER WEILSKU - Jackson Jackson (60	D. Box 10631 n, MS 39289-0631 01)961-5210 0354-6938 (fax)	
This report should be prepared by the pump installer in de installation of pump.	etail and filed with the Department within 30 days of the	
Owner Name: Rambey Hills Bapfist Church	Well Location Latitude: 30°32′891″ Longitude: 088°49′844″	
Mailing Address: JOC Batt RD	Method of Lat/Long (circle one): Conventional Survey,	
	USGS quad, Hand-held GPS, Survey-grade GPS	
Vancleave MS 39565	SW 1/ SW 1/2 Sec 6 TWN TGS Rng A8W	
City State Zip Code	Distance Direction Nearest Town	
Telephone No. <u>2088826 - 2748</u>	71/8 Miles N of STMartin	
Pump Type Circle one	Power Type Circle one	
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas	
Bucket Piston Turbine	Electric Motor Hand Tractor PTO	
Centrifugal Rotary Flowing Well	Windmill Other (specify):	
Other (specify):	Horse Power Rating of Motor: 173HP	
Date Pump Installed: <u>11-6-06</u>	Setting Depth: 140 FT Droppipe_feet	
Rated Pump Capacity:Gallons Per Minute	Number of Stages: 12.	
Pump Test Data	Method of Measuring Water Level Circle one	
Date Well Tested:		
Static Water Level (A):Feet Below Land Surface		
Pumping Water Level (B):Feet Below Land Surface	Other (specify):	
Drawdown [(B) – (A)]: Feet Below Land Surface	For flowing well, measured shut in head: \underline{NA} feet	
Fest Pumping Rate: 23 Gallons Per Minute	Well yielded <u>23</u> GPM with a drawdown of	
Duration of Pump Test (minimum 4 hours):hours	feet after hours of pumping	
HEREBY CERTIFY that the above statements are true to the best JOHN EIKINS 0-716P Print Name of Pump Installer and License No. (if applicable)	of my knowledge Signature of Pump Installer DEC 8 4	
	BY: OL	

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