Part a never received 3	(いろ State W	ell Report	For Office Use Only:		
Tankana	P	art 1	For Office Ose Only:		
County: Jackson	Mississippi Department of Environmental Quality		Aquifer:		
Permit #:	Office of Land and Water Resources		Well #:		
Driller Cost Water Wellsev.		ox 10631			
100		S 39289-0631	L. S. Elevation:		
Date drilling completed:		961-5210	E lee #		
	(601) 35	4-6938 (fax)	E-log #:		
State Law requires that this repo	out he museused by the	driller in detail and filed w	ith the Department within		
30 days of completion of drilling	of the well.	dimer in detail and mee i			
Well Owner Informa		Well	Location		
Owner Name Mike Waa		Latitude: 30 · 38 · 549	" Longitude: 088 • 44 · 57]"		
Mailing Address: <u>Box Rd</u> .		Method of Lat/Long (circle on	ne): Conventional Survey,		
			GPS, Survey-grade GPS		
Vancleave, Ms 39565		SE 1/2 SW 1/2 Sec 36 Twn T65 Rng R8 W			
City State  Telephone No. 208) 826-540	City State Zip Code   NE   Distance Direction		Nearest Town of Nearest Town		
Telephone No. (200) 600 275-TC			or Which are		
	Well I	)ata			
Purpose of Well (circle one Home Industrial Public Supply Irrigation Fish Culture Other:					
Date well drilling started: 10/23/0	Date w	vell drilling completed:	193/08		
If flowing, method of flow regulation: ValveOther (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:					
Hole depth: 74 FT Well dep	oth: 74 FT	Well grouted to a depth of	10 feet		
Type of grout (circle one): Cement Bentonite Mix					
Casing length: feet Casing diameter: inches Type of casing:					
Screen length: 10 feet Screen diameter: 3 inches Type of screen: PVC					
Screen slot size: • OCC inches Setting depth: From 64 feet to 74 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 on back of page					
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:					
Name of organization running log(s):	VA				
I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi					
Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.					
Jack Ridadell 0-4	72	Jack 16	Spell		
Print Name of Water Well Contractor and I	License No.	Signature of V	Water Well Contractor		
			RECEIVED		

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If well telescopes please sketch below and show depths.

Ground Level				

Description of Formations Encountered	From	To
TODGO	$\perp o$	2
orange + white clay	3	43
Orange+White.Clay BrownCoarse.Sand	42	74
prounice assessment		
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If more than one screen, show location of each on sketch

Sketch the property layout and include the following the well: 3) any roa	wing: 1) the well location; 2) any permanent structures of ds, power lines, or other items that may aid in locating the structures of the	n the property that may
4) indicate direction.	au, porter miles, or early means and meaning a	
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Ø1D	well	8
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BAYOU	Semmes Ro	
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P		
Landowner Name: Mike. Wood	1	

Signature of Water Well Contragtor

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BY: OLWR