County: Jackson Ca
Permit #:
Driller: Office of Geology
Date drilling completed: 102517

Other (describe):__

Top of lap pipe or reduction in casing: ____

STATE WELL REPORT

Part 1 Driller's Log

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225-2309

(601)961-5210 (601)360-0535 (fax)

60-0535 (fax)

E-Log #:

State Law requires that this report be prepared by the license holder responsible for the work and filed with the Department at the above address within 30 days of completion of drilling of the well or borehole. Well or Borehole Location Well Owner Information 12.20ngitude: 88 32 5 (Landowner if borehole is not for a water well) Contracto Owner Name: 🏻 🍽 Method of Lat/Long (check one): Conventional Survey_ USGS quad_____, Hand-held GPS/1__, Survey-grade GPS (Distance) Well / Borehole Data _ Date drilling completed: 125 Hole depth: 170 Hole diameter: Date drilling started:_ Method of dosing and volume of Chlorine used in drilling and development: add Igal Blasch per 1000 Welle Logs run (circle all applicable): No log run / Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s): _ Geotechnical/Geological Investigation Ground Source Heat Pump Purpose of borehole (circle one): Water Well Seismic Survey Other (describe) If drilling is not related to water well construction, skip the remainder of this block Purpose of Well (circle all applicable): Home Industrial Public Supply Irrigation Other (describe):___ If a flowing well, method of flow regulation: Valve _____ Other (describe) Static Water Level: _____feet [above or below] land surface Date measured: ______(circle one) Method of measurement (circle one): Steel tape Electric tape Air line Other (describe): ___ Well depth: _____ Well grouted to a depth of: _____ feet Type of grout (circle one): Neat Cement Bentonite Mix Casing length: _____feet Casing diameter: _____inches Type of casing: _ Screen diameter: _____inches Screen length: _____feet Type of screen: ___ ____inches Setting depth: From _____ _feet to __ Screen slot size: Type of completion (circle all applicable): Gravel packed Natural Development Underreamed Open hole

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

Form: OLWR-SWR-1A (4/13)

County: Jackson (n. Permit #:		For Office Use Only:
The sketch below only required for water wells	<u>Description of formations encounter</u> and boreholes, unless specifically ex	ed must be provided for all wells
If well telescopes, show depths on sketch.		
Ground Level	Description of Formations Encountered	From (depth) To (depth) Ground level
	Red clay	15 65
	Clark	65 70
	Surac	70 145
·	Blue alak	145 170
·		
	,	
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 ai	d in locating the well	· · · · · · · · · · · · · · · · · · ·
3) any roads, power lines, or other items that may aid in 4) north arrow	locating the property and the well	
•		
•		
•		
Landowner Name:		
I HEREBY CERTIFY that the well/borehole was drilled, or requirements of the Mississippi Department of Environr if applicable, and state laws.	constructed, and completed in accorda nental Quality and the Mississippi Depa	nce with all applicable regulations,
Cleius Margee 06/9 Print Name of Responsible Licensee and License No.	11-3-17 (late) Date Signat	Windle SAT
	3,5,5-0	Form: OLWR-SWR-1B (4/1.