059		
Driller DIST WELLSVCF Date drilling completed: -1-15	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)	For Office Use Only:           Well #:
State Law requires that this report b Department at the above address wit	e prepared by the license holder responsible for the third the second terms of terms	the work and fued with the or borehole.
Well Owner Information (Landowner if borehole is not for a Owner Name: JOSH DYAGO	$\frac{1}{2} \frac{1}{2} \frac{1}$	ehole Location ngitude: 088°28′51.60 <sup>11</sup> e): Conventional Survey, GPS_V_, Survey-grade GPS 28_T_65_R_5 <sup>11</sup>
	Well / Borehole Data	
Location of the source of any surface w	drilling completed: $1 - 7 - 15$ Hole depth $23$	
	e used in drilling and development:	
Logs run (circle all applicable): No log ru	Electric Gamma Ray Density Sonic Neut	ron Other:
Name of organization running log(s):		
Purpose of borehole (circle one): Water	Well Geotechnical/Geological Investigation	Ground Source Heat Pump
	ic Survey Other (describe)	
If drilling is not rela	ated to water well construction, skip the remaind	
Purpose of Well (circle all applicable):	Home Industrial Public Supply Irrigation	Fish Culture
Other (describe):		
	ation: Valve Other ( <i>describe</i> ) t [above or below] and surface Date measur (circle one)	red: <u>1-7-15</u>
	Steel tape Electric tape Air line Other ( <i>descrit</i> a depth of: 10 feet Type of grout ( <i>circle on</i>	
Well depth Def Well grouted to a Casing length: 210feet C		of casing:
	<b>A</b>	of screen: PVC
Screen slot size: 100 6 inches		tofeet
Type of completion (circle all applicab		le Natural Development
Other (describe):		RECEIVE
Top of lap pipe or reduction in casing	N/A feet	JAN 2 9 2015
If teleso	coped or more than one screen, describe on next	page

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

County:	Jackson
Permit #	

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F	or Office Use Only:
Well #:	N 612

## The sketch below only required for water wells

Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

more than one screen, show location of each on sketch more than one screen sketch more than one sketch more than one screen sketch more than one sketch more than one sketch more than one sketch more than one sketch more than sketch more than sketch	The second secon	<u>If well telescopes, show d</u>	<u>epins on sketch.</u>	Description of For	mations Encountered	From (depth)	To (depth)
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						Form: OLWI	R-SWR-1A (4

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. STATE WELL REPORT	V
County: Jackson Part 2	
Permitter Pump Installer's Completion Report	For Office Use Only:
Driller DOST WOHLEY WEISYC Mississippi Department of Environmental Quality Office of Land and Water Resources	well #: <u>M612</u>
Date completed: 1 - 7 - 15 P.O. Box 2309	
Copy information from block on Part 1         Jackson, MS 39225-2309           (601)961-5210	Aquifer:
(601) 360-0535 (fax)	
This part of the report must be completed by a licensed water well contractor or a licensed p	nump installer. A copy of Part 1
of the report must be attached and both parts filed with the Department at the above address Well Owner Information Well	s within 30 days of well completion. Location
	ongitude: 088 28' 51.60
7,00	•
	ne): Conventional Survey,
	GPS, Survey-grade GPS
	<u>- 28 T 65 R 5 W</u>
Telephone No. (D51) 186-4616 (Distance) (Direction)	of <u>ffelent</u> (Nearest Town)
Pump Type (circle one)	
Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (	describe)
	/O Gallons Per Minute
	<u>Gallons Per Minute</u>
Is This Pump (circle one): New ) Repaired Replacement Power Type (circle one)	*****
Electric Diesel Gasoline Natural Gas Tractor PTO Windmill Other (describe):	:
Horse Power Rating of Motor: Setting Depth 20FT_DP_feet Numb	<b>a</b>
Pump Test Data for Non Flowing Well	4
Date Well Tested: $1 - 9 - 15$ Duration of Pump Test ( <i>mini</i>	
Static Water Level (A): Feet Below Land Surface Pumping Water Level (B):	
Drawdown [(B) - (A)]:N/AFeet Below Land Surface Test Pumping Rate:	
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe)	):
Pump Test Data for Flowing Well	
Measured shut in head:feet. NA	
Well yieldedGPM with a drawdown offeet after	hours of pumping
Meter Installation	
Meter Manufacturer: Meter Serial Number:	
Meter Model Number/Name:	
Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):	
Installation Date: Meter installed by:	
Is This Meter (circle one): New Repaired Replacement	stalled to manufacturer standards.
	stalled to manufacturer standards. website.
Is This Meter (circle one): New Repaired Replacement Important: By submitting the above information you are certifying that this meter was ins	stalled to manufacturer standards. website.
Is This Meter (circle one): New Repaired Replacement Important: By submitting the above information you are certifying that this meter was ins For agricultural wells, a list of approved meters is on the MDEQ I HEREBY CERTIFY that the above statements are true to the best of my knowledge.	
Is This Meter (circle one): New Repaired Replacement Important: By submitting the above information you are certifying that this meter was ins For agricultural wells, a list of approved meters is on the MDEQ I HEREBY CERTIFY that the above statements are true to the best of my knowledge. DCK Kidgall D-472 1-13-15	stalled to manufacturer standards. website.

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