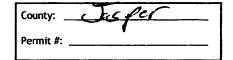
	ł	Part'1	For Office Jse Only
ermit #:	Dri	ller's Log	Well #: <u>M29</u>
sunty: <u>Jasper</u> ermit#: rtiller: <u>Carin</u>	Office of Land	and Water Resources ). Box 2309	Aquifer:
Date drilling completed: $b - b - 14$	۱.	n, MS 39225-2309	[ E-Log #:
	L (6)	01)961-5210 360-0535 (fax)	
State Law requires that this report		• •	or the work and filed with the
Department at the above address v	within 30 days of com	pletion of drilling of the we	ell or borehole.
Well Owner Informat (Landowner if borehole is not for	tion or a water well)	Well or B	orehole Location Longitude: <u>855729</u>
	ISC Y	32	
Mailing Address: 606 Co	R 41	Method of Lat/Long (check	one): Conventional Survey
		USGS quad, Hand-hel	d GPS, Survey-grade GPS
Palh Mc	39.347	NE 14 WW 14, SI	C 22 T 2 N R/3
City State	Zip Code	6 Miles SIF	of Paulding M
Telephone No. (60) 340-	1682	(Distance) (Direction	
		orehole Data	
Date drilling started: 6 -2-14 Date	e drilling completed:	Hole depth: <u>A</u>	<u>//</u> Hole diameter
Location of the source of any surface			
Method of dosing and volume of Chlor			
Logs run (circle all applicable): No log	ran Electric Gamm	a Ray Density Sonic Ne	utron Other:
Name of organization running log(s):			
Purpose of borehole (circle one) Wate	er Welt Geotechnic	cal/Geological Investigation	Ground Source Heat Pump
Seis	mic Survey Other (	describe)	
If drilling is not re	elated to water well co	onstruction, skip the remain	ider of this block
Purpose of Well (circle all applicable):	: Home Industrial	Public Supply Irrigation	Fish Culture
Other (describe):	n Fam	1	
	ulation: Valve		
If a flowing well, method of flow regu			
Static Water Level: 140 fee		] land surface Date meas	~ 1
Static Water Level: <u>140</u> fee Method of measurement ( <i>circle one</i> ):	: Steel tape Electric t	ape Air line Other (descr	ibe): <u>Str.'n</u>
Static Water Level: <u>140</u> fee	: Steel tape Electric t	ape Air line Other (descr	ibe): <u>Str.'n</u>
Static Water Level: $\underline{140}$ fee Method of measurement ( <i>circle one</i> ): Well depth: $\underline{240}$ Well grouted to	: Steel tape Electric t	cape Air line Other ( <i>descr</i> eet Type of grout ( <i>circle o</i>	ibe): <u>Str.'n</u>
Static Water Level: $\underline{140}$ fee Method of measurement ( <i>circle one</i> ): Well depth: $\underline{240}$ Well grouted to	: Steel tape Electric t a depth of: <u>/</u> 2f Casing diameter:	cape Air line Other ( <i>descr</i> eet Type of grout ( <i>circle o</i>	ibe): <u>Strvin</u> me): Neat Cement Bentonite
Static Water Level: $\underline{140}$ fee Method of measurement ( <i>circle one</i> ): Well depth: $\underline{240}$ Well grouted to Casing length: $\underline{240}$ feet Screen length: $\underline{20}$ feet	: Steel tape Electric t a depth of: <u>/</u> fo Casing diameter: Screen diameter:	cape Air line Other ( <i>descr</i> eet Type of grout ( <i>circle o</i>	ibe): $Sreen: PVL$
Static Water Level: $\underline{140}$ fee Method of measurement ( <i>circle one</i> ): Well depth: $\underline{240}$ Well grouted to Casing length: $\underline{240}$ feet Screen length: $\underline{20}$ feet	Steel tape Electric to a depth of: fo Casing diameter: Screen diameter: s Setting depth:	cape   Air line   Other (descr     eet   Type of grout (circle of grout (cir	ibe): $Srring$ one): Neat Cement Bentonite of casing: $PVL$ e of screen: $PVL$ st to $29D$ feet
Static Water Level: $\underline{/40}$ fee Method of measurement ( <i>circle one</i> ): Well depth: $\underline{240}$ Well grouted to Casing length: $\underline{240}$ feet Screen length: $\underline{20}$ feet Screen slot size: $\underline{410}$ inche	Steel tape Electric to a depth of: fo Casing diameter: Screen diameter: s Setting depth:	cape   Air line   Other (descr     eet   Type of grout (circle of grout (cir	ibe): $Sreent$ Bentonite of casing: $PVL$ e of screen: $PVL$ et to $29D$ feet ole Natural Devel <b>DEN</b>
Static Water Level: $\underline{140}$ fee Method of measurement ( <i>circle one</i> ): Well depth: $\underline{240}$ Well grouted to Casing length: $\underline{240}$ feet Screen length: $\underline{20}$ feet Screen slot size: $\underline{410}$ inche Type of completion ( <i>circle all applica</i> )	Steel tape Electric to a depth of: fo Casing diameter: Screen diameter: es Setting depth: able): Gravel packed	cape   Air line   Other (descr     eet   Type of grout (circle of grout (cir	ibe): $Sreen:$ Bentonite of casing: $PVL$ e of screen: $PVL$ et to $29D$ feet

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If well telescopes, show depths on sketch.

Ground Level

	Fo	r Office Use Only:
Well	#: _	MAG

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

From (depth) **Description of Formations Encountered** To (depth) Ground level 5 Clay 8 0

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

Sketch the property layout and include the following 1) the well location any permanent structures on the property that may aid in locating the well
any roads, power lines, pr otpen items that may aid in locating the property and the House 4) north arrow Delt New Chicken Houses 7 Debra Hossy's Pauldingms CR 41 RECEIVE JUN 27 2014 BY: OLWR Inc Landowner Name: I HEREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state laws. Print Name of Responsible Licensee and License No. Signature of Licensee Date Form: OLWR-SWR-1A (4/13)

	STATE WELL REPORT			
County: Jusper	Part 2	For Office Use Only:		
Permit #:	Pump Installer's Completion Report Mississippi Department of Environmental Quality	Well #: <u>M29</u>		
Driller: Caso	Office of Land and Water Resources	well #:		
Date completed: 6-6-14	P.O. Box 2309 Jackson, MS 39225-2309	Aquifer:		
Copy information from block on Part 1	(601)961-5210			
	(601) 360-0535 (fax)			
This part of the report must be complete	d by a licensed water well contractor or a licensed pur	np installer. A copy of Part 1		
of the report must be attached and both Well Owner Informati	parts filed with the Department at the above address w	ocation , , , , , , , , , , , , , , , , , , ,		
Owner Name: Dehra Ho		Latitude: 32°0'18 NLongitude: 88°57'29"W		
Aailing Address: 60k Ch		Method of Lat/Long (check one): Conventional Survey,		
		uad, Hand-held GPS, Survey-grade GPS		
Pachuta Mg	39347 N 14 10 N 14, Sec_	22 T2N R/3E		
City State	Zip Code	Paulie MS		
Telephone No. (10) 340 -	Zip Code <u>/682</u> (Distance) Miles <u>S/E</u> o (Direction)	(Nearest Town)		
	Pump Type (circle one)			
il arrible Airlift Centrif	ugal Flowing Well Jet Piston Rotary Other (de	scribe):		
	-14 Rated Pump Capacity:			
		Outlond for himself		
s This Pump (circle one): (New) Re	Power Type (circle one)			
Flectric Diesel Gasoline Natural Gas	Tractor PTO Windmill Other (describe):			
	Setting Depth:feet Number			
Date Well Tested:	Pump Test Data for Non Flowing Well	num 4 hours): hours		
<b>v</b>	Duration of Pump Test (mining	LES Feet Below Land Surface		
Static Water Level (A): $\frac{140}{2}$ Fee				
Drawdown [(B) - (A)]:		50 Gallons Per Minute		
Method of measurement (circle one): S	teel tape Electric tape Air line Other (describe):	Strin		
	Pump Test Data for Flowing Well			
Measured shut in head:fee		t for any start		
Well yielded GPM with a	drawdown of $2.5$ feet after $_4$	_hours of pumping		
	Meter Installation			
Meter Manufacturer:	Meter Serial Number:			
Meter Model Number/Name:	Type of Meter:			
Totalizer Register Unit and Multiplier F	actor (AF x .001, gal x 1000, etc):	RECEIVED		
	Meter installed by:			
Is This Meter (circle one): New Re				
Importants By submitting the above i	nformation you are certifying that this meter was inst	ulled to manu and rer (tap later)		
For agricult	ural wells, a list of approved meters is on the MDEQ	vebsite.		
I HEREBY CERTIFY that the above state	ments are true to the best of my knowledge			
Mr aller Woll DA	The A-274 6-94-WS Alala			
Print Name of Pump Installer and Lice	rise No. (if applicable) Date Sign	ature of Pump Installer		
		Form: OI WR-SWR-1B (4/1		

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