Date drilling completed:	(601)961-5210	L. S. Elevation:
	601)354-6938 (fax)	E-log #:
State Law requires that this report be prepared 30 days of completion of drilling of the well.		with the Department within
Well Owner Information Buffer	We We	Il Location
Owner Name W. D. SONN Y BUTTE	Latitude: 8/ • 53 · 2/	" Longitude: 89° 16 ° 07 "
Mailing Address: Po Box 125	Method of Lat/Long (circle of	one): Conventional Survey,
	USGS quad, Hand-he	ld GPS, Survey-grade GPS
STRINGER MS 39H9 City State Zin Co		Twn /N Rng OE
Telephone No. 60/1 1128 - 8082	Distance Direction Miles NORTO	Nearest Town STRINGER
	Well Data	
Purpose of Well (circle one) Home Industrial Public St	upply Irrigation Fish Culture	Other:
Date well drilling started: 17-14-07	Date well drilling completed:/	1-16-07
If flowing, method of flow regulation: Valve C		
Static Water Level: 105 feet above or below (circle	e one) land surface Date measured	:11-28-07
Method of Measurement (circle one) steel tape elect	ric tape air line other.	
Hole depth: 275 Well depth: 260	Well grouted to a depth of	/0' feet
The state of the s	Mix	
Casing length: 240 feet Casing diameter: 4	inches Type of casing:	PUC
Screen length: 20' feet Screen diameter: 1	inches Type of screen:	PUC
Screen slot size: 008 inches Setting depth: I	From 240 feet to	60 feet
Type of completion (circle all applicable): Gravel packed	Underreamed Telescoped Ope	n hole Natural Development
Other (describe		
Top of lap pipe or reduction in casing:feet	. If telescoped or more than one sc	reen, describe on back of page
Logs run (circle all applicable): No log run Electric Gamm		Other:
Name of organization running log(s):	e e	
I certify that the well was drilled, constructed, and complet	ed in accordance with all applicabl	e requirements of the Mississipni
Department of Environmental Quality and/or the Mississip	pi Department of Health regulation	ns and state laws.
JOHNY R. PARKER 0-5	$\alpha \beta$	R. Polar
Print Name of Water Well Contractor and License No.	Signature	of Water Well Contractor

rant 1

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 10631

Jackson, MS 39289-0631

Aquifer:

County: TASPER

RECEIVED

DEC 0 6 2007

BY: OLWR

If well telescopes please sketch below and show depths.

Ground Level		 	
	9		

Description of Formations Encountered	From	To
SAND	0	46
CLAY	HD	60
SAM	60	80
SANA CLAY	50	/60
GUM bo And ROCK	100	140
SANC	240	100
CLAE	700	1/3
	-	
	 	
	 	
	 	
	1	
	ļ	
	-	
L	<u></u>	لــــــا

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

Sketch the property layout and in aid in locating the 4) indicate directi	e well; 3) any roads, power lines, or other on.	r; 2) any pritems that	permaner at may ai	t structu d in loca	ires on the	e propert property	y that may	y ell;
	House							
Monday	X *				Marie and the second se			
Landowner Name 50	NNY BUFKIN							

Signature of Water Well Contractor

WELL SLOW ABOUT SAND FALLING IN ON SCREEN

DEC 0 6 2007

BY: OLWR

TACPA A		art 2	For Office Use Only:		
County: TASPER	Pump Installer's Completion Report Mississippi Department of Environmental Quality Office of Land and Water Resources		Aquifer:		
Permit #:	P.O. E	30x 10631	Well #: N-55		
Driller: JR. Porker		IS 39289-0631 961-5210			
Date completed: 11-27-07		4-6938 (fax)	Elevation:		
This report should be prepared by t	 he pump installer in det	ail and filed with the Departi	nent within 30 days of the		
installation of pump.	tion Buffington		ll Location		
Owner Name: W.D. So MV !		Latitude: 8/532/	Longitude: 89/607		
Mailing Address: RO, BoX	125	Method of Lat/Long (circle or	ne): Conventional Survey,		
		USGS quad, Har	nd-held GPS, Survey-grade GPS		
STRINGER / City State	WS 39481	¼¼ Sec_2	7 Twn / N Rng 10 E		
	•	Distance Direction	Nearest Town		
Telephone No. (601) 428-	8082	H_Miles NORTA	of STRINGER		
Pump Type		Pe	ower Type		
Circle one	- 15 A		Circle one		
Air Lift Jet	Submersible	Discal Facing Good	line Engine Natural Gas		
	Submersione	Diesel Engine Gaso			
Bucket Piston	Turbine	Electric Motor Hand			
Bucket Piston Centrifugal Rotary		Electric Motor Hand Windmill Other	i Tractor PTO		
Centrifugal Rotary Other (specify):	Turbine Flowing Well	Electric Motor Hand	i Tractor PTO		
Centrifugal Rotary	Turbine Flowing Well	Electric Motor Hand Windmill Other	Tractor PTO er (specify):		
Centrifugal Rotary Other (specify):	Turbine Flowing Well	Electric Motor Hand Windmill Othe Horse Power Rating of Moto	Tractor PTO cr (specify): cr:		
Centrifugal Rotary Other (specify): Date Pump Installed: //-26- Rated Pump Capacity: //	Turbine Flowing Well Gallons Per Minute	Electric Motor Hand Windmill Other Horse Power Rating of Motor Setting Depth:/6 C	Tractor PTO or (specify): feet feet		
Centrifugal Rotary Other (specify): Date Pump Installed: //~2.6 - Rated Pump Capacity: //	Turbine Flowing Well O 7 Gallons Per Minute	Electric Motor Hand Windmill Other Horse Power Rating of Motor Setting Depth:	r (specify): feet feet Ceasuring Water Level Circle one		
Centrifugal Rotary Other (specify): Date Pump Installed: //-26- Rated Pump Capacity: // Pump Test Data Date Well Tested: //- 27-	Turbine Flowing Well O 7 Gallons Per Minute	Electric Motor Hand Windmill Other Horse Power Rating of Motor Setting Depth:/6 C Number of Stages:/ Method of M	r (specify): r:		
Centrifugal Rotary Other (specify): Date Pump Installed: //-26- Rated Pump Capacity: // Pump Test Data Date Well Tested: //-27- Static Water Level (A): /// Fee	Turbine Flowing Well O 7 Gallons Per Minute O M et Below Land Surface	Electric Motor Hand Windmill Other Horse Power Rating of Motor Setting Depth:/6 C Number of Stages:/ Method of M	r (specify): feet feet Ceasuring Water Level Circle one		
Centrifugal Rotary Other (specify): Date Pump Installed: //-26- Rated Pump Capacity: // Pump Test Data Date Well Tested: //-27- Static Water Level (A): /// Fee Pumping Water Level (B): /// Fee	Turbine Flowing Well O 7 Gallons Per Minute O 19 et Below Land Surface at Below Land Surface	Electric Motor Windmill Other Setting Depth:/6 C Number of Stages:/ Method of M Air Line Electric M Other (specify):/6	r (specify): feet feet feet Circle one feasuring Line Steel Tape		
Centrifugal Rotary Other (specify): Date Pump Installed:	Turbine Flowing Well O 7 Gallons Per Minute O M et Below Land Surface	Electric Motor Windmill Other Horse Power Rating of Motor Setting Depth:/6 C Number of Stages:/ Method of M Air Line Electric M	r (specify): feet feet feet Circle one feasuring Line Steel Tape		

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

TORNY R. PARKER 0-553 Johnship R. Porker

Print Name of Pump Installer and License No. (if applicable)

Signature of Pump Installer

hours

Duration of Pump Test (minimum 4 hours):

RECEIVED
DEC 0 6 2007

hours of pumping

BY: OLWR