	State W	ell Report	For Office Use Only:			
county: JOIS DEN	Part 1 - Driller's Log					
County:	Mississippi Department of Environmental Quality		Aquifer:			
Permit#:	Office of Land and Water Resources P.O. Box 2309		Well#:			
Driller: A. Fincher	Jackson, MS 39225		L. S. Elevation:			
Date drilling completed: //-18-14		61- 5210 - 5228 (fax)	E los#s			
	L-10g II.		,			
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.						
Department at the above dutress Information on Well C	H CHOIC TOCATION					
(Landowner if borehole is not for a water well)		Latitude:31 .67 .11	" Longitude: 89. (/ , 13"			
Owner Name Chad Meach	4	Method of Lat/Long (circle of	1			
Mailing Address: 258 CR 6	273		GPS, Survey-grade GPS			
Q 50, 50, MI 394ZZ		NE 4SE 4 Sec_J	Twn N Rng E			
Bry Spring 5 Ms 39472 City State Zip Code		Distance Direction	of Bay Sping			
Telephone No. ((d)) 335 - 2	Telephone No. ((d)) 335 - 2423					
Well / Borehole Data						
Date drilling started: 1/-5-14 Date drilling completed: 1/-18-/4 Hole depth: 205 Hole diameter:						
Visite of the source of any surface, water used for drilling: PUNIC SUPPLY						
Method of dosing and volume of Chlorine used in drilling and development:						
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s):						
Purpose of borehole (check one): Water Well X Geotechnical/Geological Investigation Ground Source Heat Pump						
Seismic Survey Other (describe)						
Purpose of Well (check one): Home Industrial Public Supply Irrigation Fish Culture Other: _						
,						
If a flowing well, method of flow regulation: Valve Other (describe) Static Water Level: feet above on below (circle one) land surface Date measured:						
Method of Measurement (circle one) steel tape electric tape air line other:						
Well depth: 180 Well grouted to a depth of 100 feet Type of grout (circle one): Neat Cement Bentonite Mix						
Casing length: 150 feet Casing diameter: 4 inches Type of casing: PUC						
Screen length: 30 feet Screen diameter:inches Type of screen:						
Screen slot size: 608 inches Setting depth; From 150 feet to 180 feet						
Type of completion (circle all applicable): Grayel 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 next page						
Top or rap pipe of reduction in states.						

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County:		For Office Use Or	
Permit #:		Well #:	
	Dangintian at Garmatians	encountered must be provided for	ne all
The sketch below only required for water wells	and boreholes, unless spe	cifically exempted by regulations	7 1444
If well telescopes, show depths on sketch.	Description of Formations E	countered From (depth) 1	To (dep
Ground Level	Sand.	Ground level	90
,	Clan	90	145
	SAND	180	180
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on the second of			
if more than one screen, show location of each on sketch			
If more than one screen, show location of each on sketch ketch the property layout and include the following:			
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STATE WELL REPORT

County: Permit #: Dritter: Date completed: Copy information from black on Part 1

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

Part 2

Pump Installer's Completion Report 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#:	Ø 23		
Aquifer:			

This part of the report must be completed by a licensed water of the report must be attached and both parts filed with the L	r well contractor or a licensed pump installer. A copy of Part 1 Department at the above address within 30 days of well completion.				
Well Owner Information	· Well Location				
Owner Name: Chad May 44	Latitude: 3/57// N Longitude: 89///3 W				
Mailing Address: 258 Cr 273	Method of Lat/Long (check-one): Conventional Survey,				
	USGS quad Hand-held GPS , Survey-grade GPS				
Bay Springs MS 39422 City State Zip Code	NE USE W. SECT TIN R VE				
City' State Zip Code	6 Miles - SE of Box, Sorings				
Telephone No. (601) 335-2423	(Distance) (Direction) (Néarest Town)				
Pump Ty	pe (circle one)				
Submersible Turbine Air Lift Centrifugal Flowing Well	Jet Piston Rotary Other (describe):				
Date Pump Installed: 11-18-14	Rated Pump Capacity: 35 Gallons Per Minute				
Is This Pump (circle one): New Repaired Replacement					
Power Type (circle one)					
	dmill Other (describe):				
Horse Power Rating of Motor: Setting Dept	th: 80 feet Number of Stages;				
	for Non Flowing Well				
Date Well Tested: 11-18-14 Pump Test Data for Non Flowing Well Duration of Pump Test (minimum 4 hours):hours					
Static Water Level (A): 70 Feet Below Land Surface Pumping Water Level (B): 123 Feet Below Land Surface					
Drawdown [(B) - (A)]: 53 Feet Below Land Surface Test Pumping Rate: 40 Gallons Per Minute					
Method of measurement (circle one): Steel tape (Electric tape Air line Other (describe):					
Pump Test Data for Flowing Well					
Measured shut in head:feet.					
Well yieldedGPM with a drawdown of	feet afterhours of pumping				
	Installation RECEIVE				
Meter Manufacturer:	Meter Serial Number:				
Meter Model Number/Name:	A Principal Company of the Company o				
Totalizer Register Unit and Multiplier Factor (AF $ imes$.001, gal	and the second s				
Installation Date: Meter installed by:					
Is This Meter (circle one): New Repaired Replacement					
Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.					
I HEREBY CERTIFY that the above statements are true to the	e best of my knowledge.				
Arnold Finder ST 0560 11-18-14 (all).					
Print Name of Pump Installer and License No. (if applicable)	Date Signature of Fump Installer				

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