

APR-20-08 00:30 FROM-LAND & WATER

801-864-6938

T-644 P.02

F-442

K-37

County: Kemper  
 Permit #: \_\_\_\_\_  
 Driller: Darryl Parkeast  
 Date drilling completed: 12-17-09

**State Well Report**  
**Part 1 - Driller's Log**  
 Mississippi Department of Environmental Quality  
 Office of Land and Water Resources  
 P.O. Box 10631  
 Jackson, MS 39289-0631  
 (601)961-5210  
 (601)354-6938 (fax)

**For Office Use Only:**  
 Aquifer: K-37  
 Well #: \_\_\_\_\_  
 L. S. Number: \_\_\_\_\_  
 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.

<b>Information on Well Owner</b> (Landowner if borehole is not for a water well)		<b>Well or Borehole Location</b>	
Owner Name: <u>E.M.C.C.</u> Mailing Address: <u>1512 Kemper St.</u> <u>Scobda MS 39358</u> City State Zip Code		Latitude: <u>32.49.31.923</u> Longitude: <u>-89.28.34.477</u> Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS <u>Sec 8 NW 1/4</u> <u>Sec 8</u> <u>Twp 11 N</u> <u>Rng 18 E</u> Distance Direction Nearest Town <u>2.5 Miles</u> <u>North of</u> <u>Macaron</u>	
Telephone No. ( ) _____			

**Well / Borehole Data**

Date drilling started: 12-17-09 Date drilling completed: 12-17-09 Hole depth: 320 Hole diameter: 4.3/4

Location of the source of any surface water used for drilling: c. 1/2 water  
 Method of dosing and volume of Chlorine used in drilling and development: N/A

Logs run (circle all applicable):  Logging run  Electric  Gamma Ray  Density  Sonic  Neutron  Other: \_\_\_\_\_  
 Name of organization running log(s): \_\_\_\_\_

Purpose of borehole (check one): Water Well \_\_\_\_\_ Geotechnical/Geological Investigation \_\_\_\_\_ Ground Source Heat Pump \_\_\_\_\_  
 Seismic Survey \_\_\_\_\_ Other (describe) \_\_\_\_\_  
*(If drilling is not related to water well construction, add the remainder of this block)*

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 or below (circle one) land surface Date measured: \_\_\_\_\_

Method of Measurement (circle one) steel tape \_\_\_\_\_ electric tape \_\_\_\_\_ air line \_\_\_\_\_ other: \_\_\_\_\_

Well depth: \_\_\_\_\_ Wall 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 length: \_\_\_\_\_ feet Screen diameter: \_\_\_\_\_ inches Type of screen: \_\_\_\_\_

Screen slot size: \_\_\_\_\_ inches Setting depth: From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Type of completion (circle all applicable): Gravel packed \_\_\_\_\_ Underreamed \_\_\_\_\_ Telescoped \_\_\_\_\_ Open hole \_\_\_\_\_ Natural Development \_\_\_\_\_  
 Other (describe): \_\_\_\_\_

Top of log pipe or reduction in casing: \_\_\_\_\_ feet *(If telescoped or more than one screen, describe on next page)*

