Ł			
-	STATE	WELL REPORT	
county: Lafayette		Part 1	For Office Use Only:
Permit #:		riller's Log	Well #: <u>BEC</u>
Driller: Jones w. Moson		nent of Environmental Quality nd and Water Resources	Aquifer:
Date drilling completed: $4 - 35 - 13$	P	P.O. Box 2309	E-Log #:
bate dritting completed:		on, MS 39225-2309 601)961-5210	
	(601	1)360-0535 (fax)	
State Law requires that this report Department at the above address w			
Well Owner Information Well or Bor		hole Location	
(Landowner if borehole is not for	Latitude: 34,31, 43,17 Lor		ngitude: <u>87,30,16,36</u>
Owner Name: Lord A Cons		යා Method of Lat/Long (check one): Conventional Survey,
Mailing Address: Husy 7 Const between Co Rd. 201 and		USGS quad, Hand-held G	PS, Survey-grade GPS
-		NE 1/4 DOE 1/4, Sec_	34 T 65 R 3W
Abbeuille Ms City State	Zip Code	NE 14 DOE 14, Sec_ 1/2 NW N 0	Abbeville
Telephone No. (601) 370-800	\sim	(Distance) (Direction)	(Nearest Town)
Date drilling started: $4 - 3 - 13$ Date Location of the source of any surface v	e drilling completed: water used for drillir	ng: NIA	
Method of dosing and volume of Chlori		•	•
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:			
Name of organization running log(s): N A			
Purpose of borehole (circle one) Water Well Geotechnical/Geological Investigation Ground Source Heat Pump			
Seismic Survey Other (<i>describe</i>)			
If drilling is not rel	ated to water well co	onstruction, skip the remainder	of this block
Purpose of Well (circle all applicable):	Home Industrial	Public Supply Irrigation	Fish Culture
Other (describe): Job Offic	Ċ		
If a flowing well, method of flow regul	ation: Valve	• Other (<i>describe</i>)	
Static Water Level: <u>85</u> fee	t [above or below (circle one)	Dand surface Date measured	1: 4-76-13
Method of measurement (circle one): 9		and Airling Other (describe)	. string I weight
method of medsalement (enere one).	steel tape Electric	lape All the Other (describe).	-
Well depth: 305 Well grouted to a Casing length: 0.85 feet C	depth of: 10 f	eet Type of grout (circle one):	Neat Cement Bentonite Mix

	reen:
Screen slot size: <u>010</u> inches Setting depth: From <u>385</u> feet to	- 3PECE PER
Type of completion (circle all applicable): Gravel packed Underreamed Open hole	Natural Development MAY 2 8 2013
Other (describe):	MAT 28 2013
Top of lap pipe or reduction in casing:feet	BY: OLWP
If telescoped or more than one screen, describe on next page	
	Form: OLWR-SWR-1A (4/13

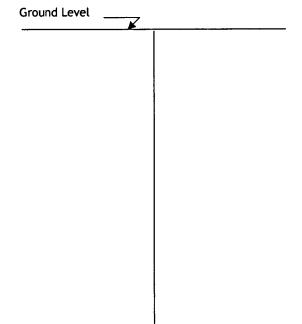
County: _	Lofeyette
Permit #:	

For	Office	Use	Only:
-----	--------	-----	-------

well #: ______B80

The sketch below only required for water wells

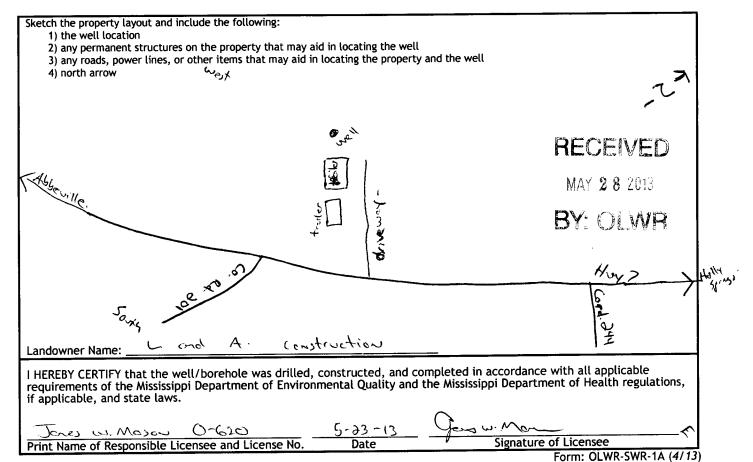
If well telescopes, show depths on sketch.



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

Description of Formations Encountered	From (depth)	To (depth)
cley dirt.	Ground level	5
red soud	5	30
Blue clay	30	75
white said	75	80
Blue clay	08	110
Rock	110	
Blue clay	10	ə15
Rock	215	216
Blue clay	216	715
Blue clay white said	275	325

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



•	STATE WI	ELL REPORT		
County: Lofoyette		Part 2	For Office Use Only:	
Permit #:		's Completion Report ent of Environmental Quality	Well #:	
Driller: Jones w. Maser	Office of Land	and Water Resources	weit #:	
Date completed: $4 - 26 - 13$		D. Box 2309 , MS 39225-2309	Aquifer:	
Copy information from block on Part 1	(60)1)961-5210		
	· · · ·	360-0535 (fax)		
This part of the report must be complete of the report must be attached and both	d by a licensed water w parts filed with the De	vell contractor or a licensed pur partment at the above addr <u>ess</u> w	np installer. A copy of Part 1 within 30 days of well completion.	
Well Owner Informati			ocation	
Owner Name: L and A const	ruction	Latitude: <u>34.31. 25.17</u> Lor	gitude: <u>89.30.16.36</u>	
Mailing Address: Mury 7 CONSTO): Conventional Survey,	
between Cond. 201 and	Co. 14. 244		PS, Survey-grade GPS	
Abbeville Ms City State	38601	<u>NE 14 NE 14, Sec_</u>	34 T 65 R 3W	
		12 Miles No	f <u>Abbeville</u> (Nearest Town)	
Telephone No. (<u>6の1</u>) <u> </u>	<u>רס</u>	(Distance) (Direction)	(Nearest Town)	
Pump Type (circle one)				
Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (<i>describe</i>):				
Date Pump Installed: <u>4-36-13</u> Rated Pump Capacity: <u>10</u> Gallons Per Minute				
Is This Pump (circle one): New Rep				
	Power Type (circle one)			
Electric Diesel Gasoline Natural Gas				
Horse Power Rating of Motor:1 he			of Stages:	
Pump Test Data for Non Flowing Well				
Date Well Tested: <u>U-26-13</u>		Duration of Pump Test (minim	hum 4 hours): $\underline{\partial 4}$ hours	
Static Water Level (A): <u>85</u> Fee				
Drawdown [(B) - (A)]:Feet Below Land Surface Test Pumping Rate:Gallons Per Minute				
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe): String weight				
	Pump Test Data	a for Flowing Well		
Measured shut in head: <u>~</u> feet				
Well yielded(GPM with a c	drawdown of $___\mathcal{N}$	4 feet after <u>09</u>	hours of pumping	
Meter Installation				
Meter Manufacturer: ル				
Meter Manufacturer: Meter Meter: Meter Meter Meter: Meter Meter: Meter Meter Meter Meter Meter Meter: Meter Me				
Installation Date:/A Meter installed by:/A				
Is This Meter (circle one): New Re	paired Replaceme	nt preve-	BJ: OTMH	
Important: By submitting the above in For agricultu	nformation you are ce ural wells, a list of app	rtifying that this meter was insta roved meters is on the MDEQ w	ulled to manufacturer standards. vebsite.	
I HEREBY CERTIFY that the above state	ments are true to the	e best of my knowledge.		
Texts w. Maser C Print Name of Pump Installer and Licer		\frown	ature of Pump Installer	

۳