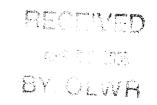
	state w	ен керогт						
County: LAMARO13	P	art 1	For Office Use Only:					
County:	1	t of Environmental Quality	Aquifer:					
Permit #:	Office of Land and Water Resources		Weli#: C //4					
Driller: James Walls	P.O. Box 10631		Well #:					
O .,,	1	IS 39289-0631	L. S. Elevation:					
Date drilling completed: 3-/7-05	(601)961-5210							
<u> </u>	(601)354	1-6938 (fax)	E-log #:					
ames Wells Walu a	ames Wells Water Well Denie							
State Law requires that this report be prepared by the driller in detail and filed with the Department within								
30 days of completion of drilling		Well Location						
Well Owner Information								
Owner Name Mack Mury		Latitude:°" Longitude:°"						
Mailing Address: 73 Novio	Rd	Method of Lat/Long (circle one): Conventional Survey,						
Sumrall Ms	39482	USGS quad, Hand-held GPS, Survey-grade GPS						
		14 14 Sec 25 Twn 16 W Rng 411						
City State Zip Code								
Telephone No. (601) 261 306	は	Distance Direction Miles West	Nearest Town					
Telephone No. (607)	1	O Miles 1000	01 1/ 3333 333					
Well Data								
		* 1 .1 . *** 1 .7	04					
Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other:								
Date well drilling started: 3-17-05 Date well drilling completed: 3-17-05								
If flowing, 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 lape electric tape air line other:								
Hole depth: 90 Well depth: 96 Well grouted to a depth of 10 feet								
Type of grout (circle one): Cement Bentonite Mix								
lave								
	ing diameter:		10 11 C					
Screen length: < Screen diameter:								
Screen slot size: 008 inches Setting depth: From 76 feet to 90 feet								
Type of completion (circle all applicable): Gravel 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 back of page								
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:								
Name of organization running log(s):								
I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi								
Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.								
JAMES MELLS								
	0.586	James W	الصاد					

Print Name of Water Well Contractor and License No.



Signature of Water Well Contractor

Sketch the property layout and include the following: 1) the well location; 2) any permanent structures on the property that may aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and the well; 4) indicate direction.

Signature of Water Well Contractor

HERSIVED

APPL 2005

BY: OLWA

STATE WELL REPORT Part 2

Pump Insta Mississippi Depar Office of L

County: _
Permit #:

Driller;

Pump Installer's Completion Report
Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 10631
Jackson, MS 39289-0631
(601)961-5210
(601)354 6039 (601)

For Office Use Only:					
Aquifer:					
Well#: 114					
Elevation:					

Date completed:	2 7 5 03	(601)3:	54-6938 (fax)	Elevation:	
		the pump installer in deta	il and filed with the Departn	nent within 30 da	ys of the
installation of pump. Well Owner Information			Well Location		
Owner Name: Mark mury		Latitude:	Latitude:Longitude:		
Mailing Address: 73 Nonis PJ Sumrall MS 39482			Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS		
	City Stat	te Zip Code	1414 Sec_3	•	
Telephone No. (sol, 261-30	43	Distance Direction Miles Wast	of Natt	
Pump Type Circle one		Power Type Circle one			
Air Lift	Jet	Submersible	Diesel Engine Gaso	oline Engine	Natural Gas
Bucket	Piston	Turbine	Electric Motor Han	ed .	Tractor PTO
Centrifugal	Rotary	Flowing Well	1	er (specify):	
Other (specify):		Horse Power Rating of Mo			
Date Pump Installed: 3-17-05		Setting Depth:	38	feet	
Rated Pump Capa	city:	Gallons Per Minute	Number of Stages:	1	
Pump Test Data		Method of Measuring Water Level Circle one			
Date Well Tested: Static Water Level (A): Pumping Water Level (B): Feet Below Land Surface		Air Line Electric M Other (specify):	Measuring Line	-	
		Peet Below Land Surface	For flowing well, measured	l shut in head:	feet
Test Pumping Rate: Callons Per Minute ~			Well yieldedGPM with a drawdown of		
Duration of Pump	Test (minimum 4 hou	ers): U hours			
I HEREBY CERTIFY that the above statements are true to the best of my knowledge. The mesure of Pump Installer and License No. (if applicable) Signature of Pump Installer					

