County: <u>Lamar</u> Permit #: Driller: <u>Dames M. Wells</u> Date drilling completed: <u>5-11-15</u> State Law requires that this report	I Mississippi Depart Office of L Jack (60 <i>be prepared by the</i>				
Department at the above address w Well Owner Information (Landowner if borehole is not for Owner Name: R P Mailing Address: Mailing Address: Mailing Address: Address: Mayuxod Dri Hatticsburg MS City State Telephone No. (LOL) 270-62	ion a water well) ive 3940 Zip Code	$31 17 32 \text{Well or Bore}$ Latitude: $31^{\circ} 17.5 45 \text{Lor}$ Method of Lat/Long (<i>check one</i> USGS quad, Hand-held G $5 1/_{4} 5 1/_{4}, \text{Secc}$ $\frac{5 1/_{4}}{5} \frac{5 1/_{4}}{5}$	ehole Location 89 23 54 ngitude: 089°23.90] e): Conventional Survey		
Well / Borehole Data Date drilling started: 5-11-15 Date drilling completed: 5-11-15 Hole depth: 198 Hole diameter: 7/2 '' Location of the source of any surface water used for drilling: Community Method of dosing and volume of Chlorine used in drilling and development: Granule achieve Logs run (circle all applicable) No log run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s):					
Purpose of Well (circle all applicable): Other (describe): If a flowing well, method of flow regula Static Water Level:5feet Method of measurement (circle one): S Well depth: Well grouted to a Casing length: feet Ca Screen length: feet S Screen slot size: feet S Type of completion (circle all applicable	Home Industrial ation: Valve [above or below (circle one) teel tape Electric depth of: 10 asing diameter: creen diameter: Setting depth e): Gravel packed	Public Supply Irrigation Other (describe) Other (describe) Iand surface Date measured tape Air line Other (describe) feet Type of grout (circle one):	Fish Culture d: 5-11-15 : : : : : : : : : : : : :		
Other (describe): Top of lap pipe or reduction in casing: If telesco	feet	one screen, describe on next pa	JUL 01 2000		

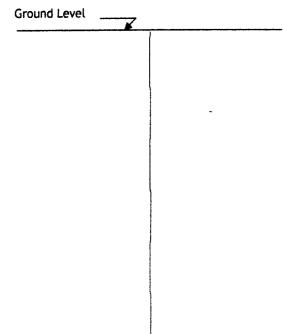
1

County: _	Lamar
Permit #:	

For Office Use Only: well #: <u>E</u> 303

The sketch below only required for water wells

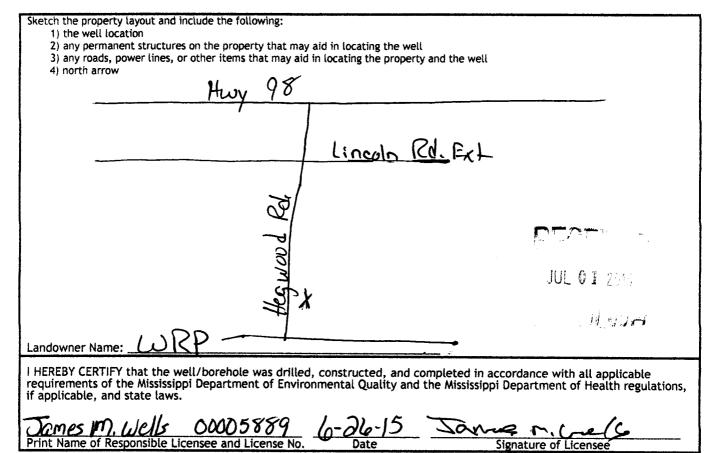
If well telescopes, show depths on sketch.



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)
topso; 1 clay	Ground level	1
clar	1	145
Sand	145	145
	<u> </u>	
······································		

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



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

	STATE WELL RE	PORT				
County: Lama	Part 2		For Office Use Only:			
Permit #:	Pump Installer's Comp Mississippi Department of Envi		Well #: E303			
Driller: James M. Wells	Office of Land and Wate	r Resources	well #:			
Date completed: 5-11-15	P.O. Box 230 Jackson, MS 39225		Aquifer:			
Copy information from block on Part 1	(601)961-521)				
(601) 360-0535 (fax)						
This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part 1 of the report must be attached and both parts filed with the Department at the above address within 30 days of well completion.						
Well Owner Informati			ocation			
Owner Name: LURP	Latitude:	DI 11,345 Lon	gitude: 089°23,901			
Mailing Address:	Method of	Lat/Long (check one)	: Conventional Survey,			
20 Maywood Drive USGS quad, Hand-held GPS, Survey-grade GPS						
Hattiesburg MS	39402 SW	4 <u>SW</u> ¼, Sec <u>C</u>	22 TAN RIAW			
Hattiesburg MS 39402 State State Zip Code Gity State Zip Code State W State W State Miles W Miles M						
	Pump Type (circle o	ne)				
Submersible Turbine Air Lift Centrif	ugal Flowing Well Jet Piston	Rotary Other (des	cribe):			
Date Pump Installed: 5-11-15	Rated Pump	Capacity: $ - 2 $	Gallons Per Minute			
Is This Pump (circle one): (New) Rep						
	Power Type (circle o	ne)				
Electric Diesel Gasoline Natural Gas	Tractor PTO Windmill Othe	(describe):				
Horse Power Rating of Motor:	Setting Depth:5()feet Number	of Stages:			
میں رہ کے	Pump Test Data for Non Flo	wing Well	//			
Date Well Tested: <u>5-11-15</u>	Duration o	f Pump Test (<i>minim</i> u	um 4 hours): hours			
Static Water Level (A): Fee	Below Land Surface Pumping	Water Level (B):	50 Feet Below Land Surface			
Drawdown [(B) - (A)]: 123 7) Feet Below Land Surface Test	Pumping Rate:	35 Gallons Per Minute			
Method of measurement (circle one): St	eel tape Electric tape Air line	Other (describe):				
	Pump Test Data for Flow					
Measured shut in head:feet.						
incusared shoe in neadieet						
Well yieldedGPM with a c	rawdown of feet	after	nours of pumping			
	rawdown of feet Meter Installation	after	nours of pumping			
Well yieldedGPM with a c	Meter Installation					
Well yielded GPM with a c	Meter Installation Mete	r Serial Number:				
Well yielded GPM with a c	Meter Installation Mete	r Serial Number:				
Well yielded GPM with a c Meter Manufacturer: Meter Model Number/Name: Totalizer Register Unit and Multiplier Fa	Meter Installation Mete Type ctor (AF x .001, gal x 1000, etc)	r Serial Number: of Meter:				
Well yielded GPM with a c Meter Manufacturer: Meter Model Number/Name: Totalizer Register Unit and Multiplier Fa Installation Date:	Meter Installation Mete Type ctor (AF x .001, gal x 1000, etc)	r Serial Number: of Meter:	JULUL			
Well yielded GPM with a comparison of the second	Meter Installation Mete Type Actor (AF x .001, gal x 1000, etc) Meter installed by: Daired Replacement	r Serial Number: of Meter: :	JUL CI			
Well yielded GPM with a comparison of the second	Meter Installation Meter Type Actor (AF x .001, gal x 1000, etc) Meter installed by: Daired Replacement formation you are certifying that ral wells, a list of approved meter	r Serial Number: of Meter: : this meter was install is on the MDEQ we	JUL C I (
Well yielded GPM with a comparison of the second	Meter Installation Meter Installation Mete Type Actor (AF x .001, gal x 1000, etc) Meter Installed by: Daired Replacement formation you are certifying that ral wells, a list of approved meter ments are true to the best of my	r Serial Number: of Meter: : this meter was install to son the MDEQ we knowledge.	JUL CI			
Well yielded GPM with a comparison of the second	Meter Installation Meter Meter Type Actor (AF x .001, gal x 1000, etc) Meter installed by: Daired Replacement formation you are certifying that ral wells, a list of approved meter ments are true to the best of my	r Serial Number: of Meter: this meter was install is on the MDEQ we knowledge.	JUL CI			

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