State W	Vell Report For Office Use Only:		
	Driller's Log		
I MISSISSION DEPORTOR	nt of Environmental Quality Aquifer:		
	and Water Resources Box 2309 Well #:		
Driller: JAMES WELL Jackso	n, MS 39225		
	9901- 5210 1 5229 (fax)		
	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 com Information on Well Owner	Well or Borehole Location		
(Landowner if borehole is not for a water well)			
Owner Name Melan Bennett	Latitude: <u>31 ° 15 00</u> " Longitude: <u>89 ° 21 ' 08 "</u>		
	Method of Lat/Long (circle one): Conventional Survey,		
Mailing Address: 679 Tatu Camp Kd	USGS quad, Hand-held GPS, Survey-grade GPS		
P1111 MS 39475			
	NE 1/ SE 1/ Sec_ I Twn_ 3 h Rng 14W		
City State Zip Code	Distance Direction Nearest Town		
	Distance Direction Nearest Town <u>2</u> Miles South of <u>Nearest Town</u>		
Telephone No. (60) 264 - 2896			
Well / Bord	ehole Data		
Date drilling started: 3-25-09 Date drilling completed: 3-25-69 Hole depth: 200 Hole diameter: 7			
Location of the source of any surface water used for drilling: Will Water Method of dosing and volume of Chlorine used in drilling and development: Short 3.44			
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:			
• · · · · · · · · · · · · · · · · · · ·			
Purpose of borehole (check one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump			
Seismic SurveyOther (describe)			
If drilling is not related to water well construction, skip the remainder of this block			
Purpose of Well (check one): Home $\underline{V}$ Industrial Public Supply Irrigation Fish Culture Other:			
If a flowing well, method of flow regulation: Valve Other (describe)			
_			
Method of Measurement (circle one) steel tape electric tape air line other:			
Well depth: <u>200</u> Well grouted to a depth of <u>10</u> feet Type of grout (circle one); Neat Cement Bentonite Mix			
Casing length: 180 feet Casing diameter: 4 inches Type of casing: PUC			
Screen length: <u>200</u> feet Screen diameter: <u>4</u> inches Type of screen: <u>PVC</u>			
Screen slot size: <u>,008</u> inches Setting depth: From <u>/80</u> feet to <u>200</u> 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 next page			
Form: OLWR-SWR-1A (04/08			

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## The sketch below only required for water wells

If well telescopes, show depths on sketch. Ground Level

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

Description of Formations Encountered	From (depth)	fo (depth)
Description of I shimed	Ground Level	2
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Jand	1205	200
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If more than one screen, show location of each on sketch

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) a north arrow. Turtun ( une # ) Purvis ٦Ŋ Nattislang () B.ome Landowner Name: Form: OLWR-SWR-1A (04/08)

I certify that the well/horehole was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state

JAMES WELLS 0.586

Wall amos

Print Name of Remierarible Licenste and Livense No.

Truin:

Signature of Licensee

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STATE WELL REPORT		
County:  Permit #:  Pump Installer's    Permit #:  Mississippi Departmen    Driller:  JAMES WELLS  Proceeding    Date completed:  8-25-09  (601)	Part 2  For Office Use Only:    s Completion Report  Aquifer:    and Water Resources  Muifer:    Box 2309  Well #:    h, MS 39225  Well #:    961-5210  Elevation:    i1-5228 (fax)  Elevation:    contractor or a licensed pump installer. A copy of Part 1 of the    at the above address within 30 days of well completion.    Well Location	
Owner Name: Melani Bennett Mailing Address: 679 Teature Comp Rd <u>Punie MS</u> <u>39475</u> City State Zip Code Telephone No. (601) 269-2876	Latitude: <u>31-15-00</u> Longitude: <u>89-21-08</u> Method of Lat/Long (check one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS <u>NE 4 SE 4 Sec1 T_3h R14 H</u> Distance Direction Nearest Town <u>2 Miles South</u> of <u>Nattuistang</u>	
Pump Type Circle one    Air Lift  Jet  Submersible    Bucket  Piston  Turbine    Centrifugal  Rotary  Flowing Well    Other (specify):	Power Type Circle one    Diesel Engine  Gasoline Engine  Natural Gas    Electric Motor  Hand  Tractor PTO    Windmill  Other (specify):	
Pump Test Data    Date Well Tested: $8 - 25 - 09$ Static Water Level (A): $90$ Feet Below Land Surface    Pumping Water Level (B): $120$ Feet Below Land Surface    Drawdown [(B) - (A)]: $100$ Feet Below Land Surface    Test Pumping Rate: $15^{-}$ Gallons Per Minute    Duration of Pump Test (minimum 4 hours): $9^{-}$ hours	Method of Measuring Water Level Circle one    Air Line  Electric Measuring Line  Steel Tape    Other (specify):	
I HEREBY CERTIFY that the above statements are true to the best of my knowledge. <u>JAMES</u> <u>VELLS</u> <u>0-586</u> <u>Print Name of Pump Installer and License No. (if applicable)</u> <u>Signature of Pump Installer</u> Form: OLWR-SWR-1B (04/08) <b>RECEIVE</b>		

SEP 1 1 2009

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