Rurt 2 never received 4/13 State	Well Report
	For Office Use Only:
Mississinni Danartm	Part 1 ent of Environmental Quality Aquifer:
Permit #: Office of Lanc	l and Water Resources Pay 10621 Well #: 6-120
Driller: Willie L. Bryant P.O.	. DUX 10051
Jackson,	MS 39289-0631 L. S. Elevation:
	1)961-5210 554-6938 (fax) E-log #:
(001)3	E-log #:
State Law requires that this report be prepared by the 30 days of completion of drilling of the well.	e driller in detail and filed with the Department within
Well Owner Information	Well Location
Owner Name Colin Reed	Latinda 33 . 21 90 " Landa 190 . 16 . 17 "
	Latitude: <u>33 • 32 90</u> "Longitude: <u>090 • 16 • 13</u> " 54 Method of Lat/Long (circle one): Conventional Survey,
Mailing Address: 801 N. Curtis Wood Ln.	
	USGS quad, Hand-held GPS Survey-grade GPS
Nashville TN 37204 City State Zip Code	500 14 SE 14 Sec 35 Twn 2 DN Rng 1 W
	Distance Direction Nearest Town
Telephone No. (615) 316 - 6550	Distance Direction Nearest Town <u>3-5</u> Miles <u>NW</u> of <u>Green wood</u>
	l Data
Purpose of Well (circle one) Home Industrial Public Supply	Irrigation Fish Culture Other:
Date well drilling started: <u>11-5-05</u> Date	
If flowing, method of flow regulation: Valve Other	(describe)
Static Water Level: 182 feet above orbelow (circle one	
—	
Method of Measurement (circle one) steel tape electric tap	e air line other: Koped weight
Hole depth: <u>/00</u> Well depth: <u>/00</u>	Well grouted to a depth offeet
Type of grout (circle one): Cement Bentonite Min	
	inches Type of casing: <u>PVC /60</u>
Screen length: <u>20</u> feet Screen diameter: <u>4</u>	inches Type of screen: IVC SCH 40
10	feet tofeet
Type of completion (circle all applicable): Gravel packed Under	erreamed Telescoped Open hole Natural Development
Other (describe):	
Top of lap pipe or reduction in casing:	telescoped or more than one screen, describe on back of page
Logs run (circle all applicable) No log run Electric Gamma Ra	y 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 De	epartment of Health regulations and state laws.
Willie L. Bryant 0-639	Willie L. Brug T
Print Name of Water Well Contractor and License No.	Signature of Water Well Contractor
milledfor; Irrigation Equipment In	
	C. RECEIN

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• If well telescopes please sketch below and show depths.

Ground Level

l Level	Description of Formations Encountered	From	To
	Top Soil & Brown Sand	0	20
	Brown, fine, I med. sand	20	40
	Medi + Coorse sand	40	60
	gravel	60	80
	heav provel	80	100
			
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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) indicate direction 4) indicate direction. myster Gty Columbian (V) E 539 Gold Bell MBChurch SGreen weed HWY 82 Landowner Name: Colin Reed

Willie L. Bupent Signature of Water Well Constactor

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