

Part 2 never received 4/13

State Well Report Part 1 - Driller's Log

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 10631
Jackson, MS 39289-0631
(601)961-5210
(601)354-6938 (fax)

County: Leflore
Permit #: GW-443911
Driller: Charles M. Nichols
Date drilling completed: 6/23/10

For Office Use Only:
Aquifer: _____
Well #: M124
L. S. Elevation: _____
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 completion of drilling of the well or borehole.

<p align="center">Information on Well Owner (Landowner if borehole is not for a water well)</p> <p>Owner Name: <u>Butch Mooneyham</u> Mailing Address: <u>12345 County Rd. 136</u> <u>Ita Bena MS 38941</u> City State Zip Code Telephone No. () _____</p>	<p align="center">Well or Borehole Location</p> <p>Latitude: <u>33° 26' 55" N</u> Longitude: <u>90° 31' 55" W</u> Method of Lat/Long (circle one): Conventional Survey, <u>36</u> USGS quad, <u>Hand-held GPS</u>, Survey-grade GPS <u>SE</u> 1/4 <u>NW</u> 1/4 Sec <u>15</u> Twn <u>18N</u> Rng <u>02W</u> Distance _____ Direction _____ Nearest Town _____ Miles _____ of _____</p>
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Well / Borehole Data

Date drilling started: 6/23/10 Date drilling completed: 6/23/10 Hole depth: 101 Hole diameter: 26"

Location of the source of any surface water used for drilling: _____
Method of dosing and volume of Chlorine used in drilling and development: HTH

Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: _____
Name of organization running log(s): _____

Purpose of borehole (check one): Water Well Geotechnical/Geological Investigation _____ Ground Source Heat Pump _____
Seismic Survey _____ Other (describe) _____
If drilling is not related to water well construction, skip the remainder of this block

Purpose of Well (check one): Home _____ Industrial _____ Public Supply _____ Irrigation Fish Culture _____ Other: _____

If a flowing well, method of flow regulation: Valve _____ Other (describe) _____

Static Water Level: 34 feet above or below (circle one) land surface Date measured: _____

Method of Measurement (circle one) steel tape electric tape air line other: _____

Well depth: 101 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 60 feet Casing diameter: 16" inches Type of casing: PVC

Screen length: 40 feet Screen diameter: 16 inches Type of screen: PVC

Screen slot size: .035 inches Setting depth: From 61 feet to 101 feet

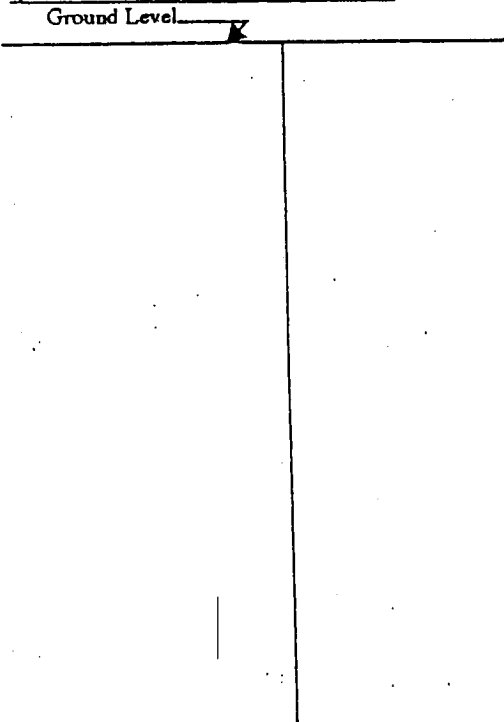
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development
Other (describe): _____

Top of lap pipe or reduction in casing: _____ feet. *If telescoped or more than one screen, describe on next page*

BY: CHIEF

The sketch below only required for water wells

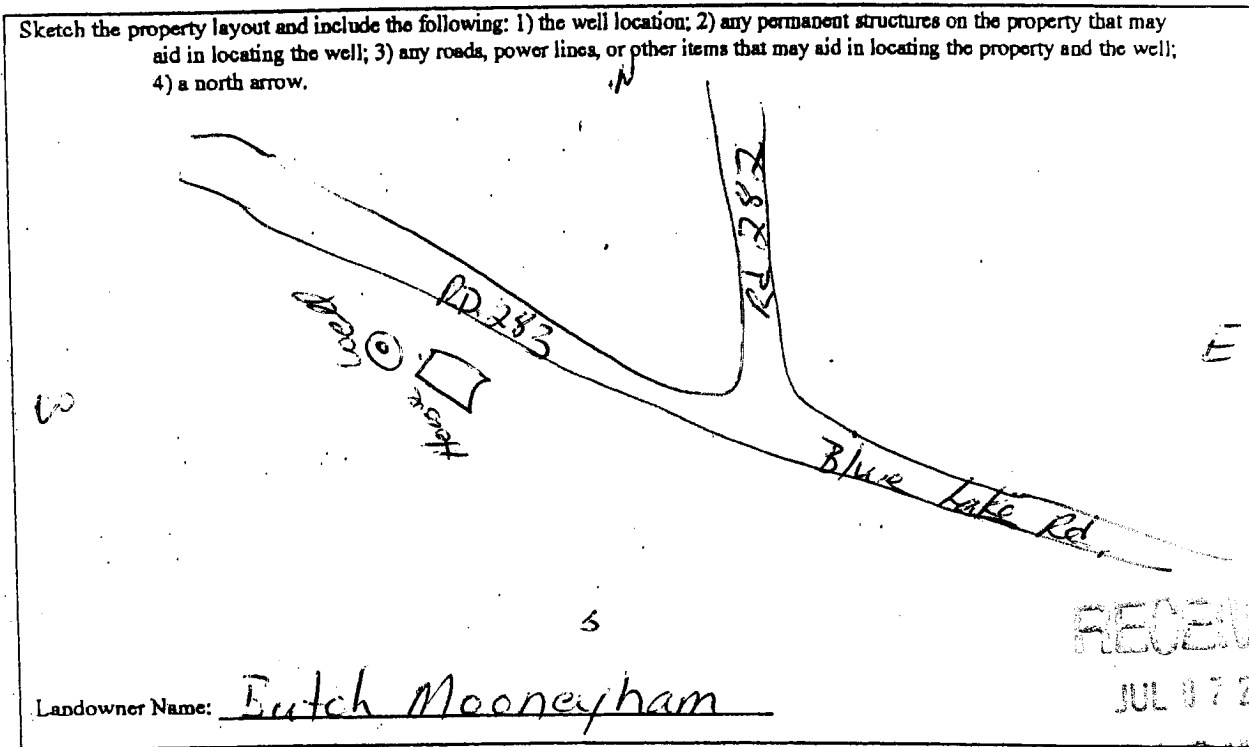
If well telescopes, show depths on sketch



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)
	Ground Level	
Clay	0	3
Sand	3	40
med. sand	40	60
med + coarse sand	60	70
coarse sand, pebbles & gravel	70	100
cemented gravel	100	101

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



I certify that the well/borehole 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 laws.

Charles M. Nichols 0-0667-6-27-10 Charles M. Nichols
Print Name of Responsible Licensee and License No. Date Signature of Licensee