	State w	en Report	T OF U O		
County: Lincoln	Part 1 – Driller's Log		For Office Use Only:		
·	Mississippi Department of Environmental Quality		Aquifer:		
Permit #:	Office of Land and Water Resources		Well #: 6-427		
Driller: LARRY EASley		3ox 10631	Well #:		
	Jackson, MS 39289-0631		L. S. Elevation:		
Date drilling completed: 4-6-06	, ,	961-5210			
	(601)354-6938 (fax)		E-log #:		
State Law requires that this report Department at the above address	within 30 days of comp	letion of drilling of the well	or borehole.		
Information on Well Owner Well or Borehole Location (Landowner if borehole is not for a water well)					
Owner Name James ART Herrin		Latitude: " `	_" Longitude: ° "		
Mailing Address: 131 Pine tale Ln		Method of Lat/Long (circle one): Conventional Survey,			
USGS quad, Hand-held GPS, Survey-grade GPS		GPS, Survey-grade GPS			
BrookLaven 145 39601 1/4 1/4 Sec 31 Twn 7N Rng 78  City State Zip Code Distance Direction Nearest Town 1					
City Stat	e Zip Code	Distance Direction  Miles	of Brochaven		
Telephone No. ()					
	Well / Bore	hole Data			
Date drilling started: 4-6 TGDate dri Location of the source of any surface wate Method of dosing and volume of Chlorine	lling completed: 4-6- r used for drilling: CTC used in drilling and devel	-06 Hole depth: 200' ck lopment: / 98/ Fo CVE	Hole diameter: 7 /8  RY 3000 34/		
Logs run (circle all applicable): Tolog pur 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: 82 feet above or below (circle one) land surface Date measured: 4-7-06					
<u> </u>	eel tape electric tape				
Well depth: 190 Well grouted to a depth of 10 feet Type of grout (circle one) Neat Cement Bentonite Mix					
Casing length: 170' feet Casing diameter. 4 inches Type of casing: PVC					
Screen length: 20 feet Screen diameter: 4 inches Type of screen: PVC					
Screen slot size: 0/0 inches Setting depth: From 170 feet to 190 feet					
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole latural Development					

Other (describe):

Top of lap pipe or reduction in easing:

Form: OLWR-SWR-1A

feet. If telescoped or more than one screen, describe on next page

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BY: OLWR

BY: OLWR

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

f more than one screen, show location of each on sketch  the property Jayout 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.	Ground Level	Description of Formations Er	countered From (depth) Ground Level	To (depth)
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The sketch below only required for water wells

## STATE WELL REPORT

## County: Lincoln Driller: Date completed:

## Part 2

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

For Office Use Only:		
Aquifer:		
Well #: 6-417		
Elevation:		

(601)354-6938 (fax) Copy information from block on Part 1 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 Location Well Owner Information \_\_\_\_Longitude:\_ Latitude: Method of Lat/Long (check one): Conventional Survey\_\_\_\_\_, Mailing Address:\_ USGS quad\_\_\_\_\_, Hand-held GPS\_\_\_\_, Survey-grade GPS\_\_\_\_ 1/4 \_\_\_\_ 1/4 Sec\_\_\_\_ T \_\_\_\_ R\_\_\_\_ State Zip Code City Nearest Town Direction Miles of Telephone No. (\_\_\_\_) Power Type Pump Type Circle one Circle one Natural Gas Gasoline Engine Diesel Engine Submersible Jet Air Lift Tractor PTO Hand lectric Motor Turbine Piston Bucket Other (specify): Windmill Flowing Well Rotary Centrifugal Horse Power Rating of Motor: Other (specify): \_ Date Pump Installed: 4-7-06 Setting Depth: Rated Pump Capacity: 12 Gallons Per Minute Number of Stages: Method of Measuring Water Level Pump Test Data Circle one 4-7-06 Date Well Tested: Air Line Electric Measuring Line Static Water Level (A): 82 Feet Below Land Surface Other (specify): \_ Pumping Water Level (B): 90 Feet Below Land Surface For flowing well, measured shut in head: Feet Below Land Surface Drawdown [(B) - (A)]: \_\_\_ GPM with a drawdown of Well yielded \_\_Gallons Per Minute Test Pumping Rate: \_\_\_ Duration of Pump Test (minimum 4 hours): 4 hours

I HEREBY CERTIFY that the above statements are true to the best of	f my knowledge.
Boign Easley D-539	Bar
Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer Form OI WR-SWR-1B

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