## STATE WELL REPORT

## Part 1

County: Licola

Date drilling completed:

Permit #:

Driller's Log Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 2309 Jackson, MS 39225-2309 (601)961-5555

(601)961-5228 (fax)

State of Section 1	961
	Use Only:
Well #:	119
Aquifer:	
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.

Well Owner Information	Well or Borehole Location	
(Landowner if borehole is not for a water well)	Latitude: 31°24′ 48.7 Longitude: 90°31′ 58.4°	
Owner Name: Stan Carter.	Latitude: 31 29 10.7 Longitude: 10 31 3 0.1	
Comment of the second of the s	Method of Lat/Long (check one): Conventional Survey,	
Mailing Address: Shannow Dr		
	USGS quad, Hand-held GPS, Survey-grade GPS	
Box Chille Mc	NE 14 5E 14, Sec 7 T 5N R 7E	
City State Zip Code	Wiles of	
	Miles of (Distance) (Direction) (Nearest Town)	
Telephone No. ()		
	Borehole Data	
Date drilling started: 9-19-19. Date drilling completed	1:9-19-19. Hole depth: 100 Hole diameter: 81	
g) stranger and the str		
Location of the source of any surface water used for drill	Builds India to Paris service on the twenty eller and a compared the	
Method of dosing and volume of Chlorine used in drilling	and development:	
Logs run (check all applicable): Flog run Electric Gam	nma Ray Density Sonic Neutron Other:	
Name of organization running log(s):		
	nical/Geological Investigation Ground Source Heat Pump	
Seismic Survey Other	(describe) FEB 1 0 2020	
	construction, skip the remainder of this block	
Purpose of Well (check all applicable): Home Industr		
Purpose of Well (check all applicable): Flome Industr	iatPublic Supply[2]ITTigationITSIT cutture	
Other (describe):		
If a flowing well, method of flow regulation: Valve	Other (describe)	
Static Water Level: 60 feet above or be (check one)	towj tailu surface Date measured.	
Method of measurement (check one) Steel tape Electri	. 4   1   1   1   1   1   1   1   1   1	
Well depth: 100 Well grouted to a depth of: 10 feet Type of grout (check one) Neat Cement Bentonite Mix		
Casing length: 90 feet Casing diameter: 9" inches Type of casing: Pue		
Screen length:	19 inches Type of screen: Puc	
Screen slot size:010 inches Setting depth: From90 feet to100 feet		
Type of completion (check all applicable) ravel packed	Underreamed Open hole Natural Development	
Other (describe):		
Top of lap pipe or reduction in casing:feet		
If telescoped or more than	n one screen, describe on next page	

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

The sketch be	low only	required for	water wells
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Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

If well telescopes, show depths on sketch.	
Ground Level	

Description of Formations Encountered	From (depth)	To (depth)
Day State of the s	Ground Level	
Cherj	0	20
Cluff	20	140
Band	40	60
Starel-	60	170
Clay	70	180
Sauld	80	90
(exite Said	90	100
materiarem to acut the middle con-		
AND THE RESIDENCE OF THE PARTY		40 A. S.
Adminut.	In Temporal Inc	N
(F0	(Figureopie 1)	andown r
201	Y	
		19/1/6/1
		1111
	and the second	ARGERTS N
the second of th		
600 1 007		
20010-3	- 60	
		Walter Company

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

4	perty layout and include the following: 1) the well location; 2) any permanent should be property and the well; 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.
	If deliting is not senten in water well construction, ship the next dister of this short
	Well titledown controlled by the Transaction of Project Original Project Cities
	(9) 79
	ter Level. Seet blove on celow) iand authore l'are meast of
	Name: Stan Carter and and some

# Google Maps 31°24'48.7"N 90°31'58.4"W



Imagery ©2020 Maxar Technologies, USDA Farm Service Agency, Map data ©2020

200 ft

Stan Carte

9-19-19,

Shunnon DI,

100

60

90

3/4 HP.

RECEIVED FEB 10 2020 BY OUT

## STATE WELL REPORT

LicolN

Copy information from block on Part 1

County: \_\_\_\_\_\_
Permit #: \_\_\_\_
Driller: \_\_\_\_\_

Date completed:

#### Part 2

Pump Installer's Completion Report
Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309

P.O. Box 2309 Jackson, MS 39225-2309 (601)961-5210 (601) 360-0535 (fax)

For C	office Use Only:
Well #:	P 119
Aquifer:	

This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part 1

This part of the report must be attached and both parts filed with the Department at the above address within 30 days of well completion.

of the report must be attached and both parts filed with the	Well Location	
Well Owner Information	Latitude: 31 24 48.7 Longitude: 90 31 58.47	
Owner Name: Stan Carter		
Mailing Address: Shannon Dr.	Method of Lat/Long (check one): Conventional Survey,	
	USGS quad, Hand-held GPS, Survey-grade GPS	
R. d. He ms	NE 1/4 SE 1/4, Sec 7 T 5N R 7E	
Bouge Chiffe ins City State Zip Code		
Telephone No. ()	Miles of Nearest Town)	
	ype (check <i>one</i> )	
The Tarrest Towning Well		
Submersible Murbine Air Lift Centringal Flowing well	Rated Pump Capacity: 12 Gallons Per Minute	
Is This Pump (check one): New Repaired Replacem	ent	
Power	type (cneck one)	
Electric Diesel Gasoline Natural Gas Tractor PTO W	Vindmill □Other (describe):	
Horse Power Rating of Motor: 3/4 Setting De	epth: 90 feet Number of Stages: 12	
Pump Test Dat	ta for Non Flowing Well	
Date Well Tested:	h a summ	
Date Well Tested.	ce Pumping Water Level (B): Feet Below Land Surface	
Static Water Level (A): reet below Lailu Sui la	Test Dumping Pate: Gallons Per Minute	
	Surface Test Pumping Rate:Gallons Per Minute	
Method of measurement (check one): Steel tape Electric		
	Data for Flowing Well FEB 10 2020	
Measured shut in head:feet.	PV -	
Well yieldedGPM with a drawdown of	feet afterhours of pumping	
Mete	er Installation	
Meter Manufacturer:	Meter Serial Number:	
Meter Model Number/Name: Type of Meter:		
Totalizer Register Unit and Multiplier Factor (AF x .001, s	gal x 1000, etc):	
Installation Date: Meter installed by	왕이 보다는 그 아이들 그녀는 물에 가득하는 경기에 되었다. 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그	
Is This Meter (check one): New Repaired Replace		
Important: By submitting the above information you are For agricultural wells, a list of	e certifying that this meter was installed to manufacturer standards.  approved meters is on the MDEQ website.	
I HEREBY CERTIFY that the above statements are true to		
O A A A A A A A A A A A A A A A A A A A		
BIAd Externald Odge	9-19-19 Bul Joles	
Print Name of Pump Installer and License No. (if applicab	ole) Date Signature of Pump Installer	

Form: OLWR-SWR-2A (4/13)