	State W	ell Report	For Office Use Only:	
County: Marian	Part 1 - Driller's Log		For Office ose Only.	
	Mississippi Department of Environmental Quality		Aquifer:	
Permit #: <u>0 - 586</u>	Office of Land and Water Resources		Well#: <u>K98</u>	
Driller: JAMES WELLS	P.O. Box 2309 Jackson, MS 39225			
		961- 5210	L. S. Elevation:	
Date drilling completed: 8-25-1	(601)961	1- 5228 (fax)	E-log #:	
	` '		<u> </u>	
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.				
Department at the above address within 50 days of comp		Well or Bo	rehole Location	
Information on Well Owner		1		
(Landowner if borehole is not for a water well)		Latitude: 31 º 10 ' 40	" Longitude: <u>89 • 53 • 11 "</u>	
Owner Name Kerry Kat	1,++			
		Method of Lat/Long (circle or	ne): Conventional Survey,	
Mailing Address: 465 Ten mile creek Rd.		USGS quad, Hand-held	GPS, Survey-grade GPS	
		SW 1/2 SW 1/2 Sec -		
Church M	15 39483	5W 4 5W 4 Sec_	I WILL KING	
Foxworth MS 39483 City State Zip Code		Distance Direction	Nearest Town	
		Miles Sh	of Fexworth	
Telephone No. (601) 736-57	48			
	Well / Bore		- 44 4	
Date drilling started: 8-25-1/ Date drilling completed: 8-25-1/ Hole depth: 110 Hole diameter: 7/2"				
Location of the source of any surface water used for drilling: 1100; Secret				
Method of dosing and volume of Chiorine used in drifting and development.				
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: 40feet above of below (circle one) land surface Date measured: 8-35-11				
Method of Measurement (circle one) steel tape electric tape air line other:				
Well depth: 10 Well grouted to a depth of 10 feet Type of grout (circle one) Neat Cement Bentonite Mix				
Casing length: 90 feet Casing diameter: 4 inches Type of casing: 900				
Screen length: 20 feet Screen diameter: 4 inches Type of screen: PVC				
Screen slot size:				

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

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

Other (describe):

Top of lap pipe or reduction in casing: ___

Form: OLWR-SWR-1A (04/08)



To (depth)

From (depth)

Ground Level

Description of formations encountered must be provided for all

to 250i

Signature of Licensee

Description of Formations Encountered

wells and boreholes, unless specifically exempted by regulations

1		
If more than one screen, show location of each on sketch		
Sketch the property layout and include the following: 1) the well I	ocation: 2) any permanent structures on the property that may	
aid in locating the well: 3) any roads, power lines, of	r other items that may aid in locating the property and the well;	
4) a north arrow.		
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ギー・1	
^	2	
1 1	.3	
/	Z .	
	S	
1	(4)	
· ~ ·	Cete 1	
]	The state of the s	
\ \ \	<u></u>	
4W 35 5	Ya	
	% [1
<u> </u>	31	
N	21	
3	21	
الملحن	Hwy 98 -> Tylerton	3
Coxwally	1.1124 10	`
Foxworth	•	
	Bullack Re and Hwy 98 -> Tyler tou	
Landowner Name: Keccy Rather		- 1
Landowner Name: Kerry Ratiff		
	Form: OLWR-SWR-1A	(04/08)

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

Date

The sketch below only required for water wells

JAMES WELLS 0-586

Print Name of Responsible Licensee and License No.

If well telescopes, show depths on sketch.

Ground Level-

STATE WELL REPORT

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 (601)354-6938 (fax)

For Office Use Only:		
Aquifer:		
Well #:	K98	
Elevation: _		

This report should be prepared by the pump installer in detail and filed with the Department whose 30 days of the

Marion

Print Name of Pump Installer and License No. (if applicable)

County:

Permit#:

Driller JAMES

Date completed: 5.25-11

installation of pump.	Well Location	
Well Owner Information	· ·	
Owner Name: Kerry Katliff	Latitude: 31-10-40 Longitude: 89-53-11	
Mailing Address: 465 Temmile creek Rd.	Method of Lat/Long (circle one): Conventional Survey,	
	USGS quad, Hand-held GPS, Survey-grade GPS	
Foxworth MS 39483	5W 14 5W 14 Sec 34 Twn 3N Rng 9W	
City State Zip Code	Distance Direction Nearest Town	
221 571.57	8 Miles 5W of Fokubrth	
Telephone No. (601) 736 - 5748	Miles of	
	Power Type	
Pump Type Circle one	Circle one	
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas	
Bucket Piston Turbine	Flectric Motor Hand Tractor PTO	
THE ACTUAL TELESIS	Windmill Other (specify):	
Continued	Horse Power Rating of Motor:	
Other (specify): 8.25-11	Setting Depth: 75 feet	
Date Pump Installed: 0' d3-/(Number of Stages:	
Rated Pump Capacity: Gallons Per Minute	Number of Stages:	
	Method of Measuring Water Level	
Pump Test Data	Circle one	
Date Well Tested: 8-25-//	Air Line Electric Measuring Line Sieel Tape	
Static Water Level (A): 40 Feet Below Land Surface		
Pumping Water Level (B): 75 Feet Below Land Surface	Other (specify):	
	For flowing well, measured shut in head:feet	
Drawdown [(B) - (A)]: 45 Feet Below Land Surface	17	
Test Pumping Rate: Gallons Per Minute	Well floated	
Duration of Pump Test (minimum 4 hours):hours	feet after 4 hours of pumping	
to the heart	of my knowledge.	
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.		
JAMES WELLS 0-586	Signature of Pump Installer	

SEP 1 9 2011