

County: MARSHALL  
 Permit #: \_\_\_\_\_  
 Driller: F LANGFORD  
 Date drilling completed: 12-28-04

### Well Driller Report and Well 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)

For Office Use Only:  
 Aquifer: \_\_\_\_\_  
 Well #: A-69  
 L. S. Elevation: \_\_\_\_\_  
 E-log #: \_\_\_\_\_

State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.

Well Owner Information	Well Location
Owner Name: <u>RAY CARVER no</u>	Latitude: <u>34° 57' 30"</u> Longitude: <u>89° 36' 33"</u>
Mailing Address: <u>new location (911)</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
<u>CAYCE SUB,</u>	50 1/4 SE 50 1/4 Sec <u>34</u> Twn <u>19</u> Rng <u>4W</u>
<u>VICTORIA MS</u> City State Zip Code	Distance <u>1</u> Miles Direction <u>S</u> of Nearest Town <u>new 72 Hwy</u>
Telephone No. ( ) _____	

**Well Data**

Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other: \_\_\_\_\_

Date well drilling started: 12-28-04 Date well drilling completed: 12-28-04

If flowing, method of flow regulation: Valve \_\_\_\_\_ Other (describe) \_\_\_\_\_

Static Water Level: 80 feet above or below (circle one) land surface Date measured: \_\_\_\_\_

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

Hole depth: 150 Well depth: 150 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 20 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 10 feet Screen diameter: 4 inches Type of screen: slotted PVC

Screen slot size: 1/2 1/3 inches Setting depth: From 170 feet to 180 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 back of page

Logs run (circle all applicable): No log run Electric Gamma Ray 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 Department of Health regulations and state laws.

Frank Langford 0-622 Frank Langford  
 Print Name of Water Well Contractor and License No. Signature of Water Well Contractor

If well telescopes please sketch below and show depths.

RECEIVED  
 JAN 18 2005  
 BY: OLWR



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 #: A-69
Elevation:

County: MARSHALL
Permit #:
Driller: E LANGFORD
Date completed: 12-28-04

This report must be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump. A copy of Part 1 of this report must be attached to this report.

Well Owner Information: RAY CARVER, NEW LOCATION (911 ye) CAYCE SUBD, VICTORIA MS, PLANTERS COVE. Well Location: SW 1/4 8W 1/4 Sec 34 Twn 15 Rng 14W, 1 Miles S of New Hwy off Lee Creek Rd.

Pump Type: Submersible. Power Type: Electric Motor. Date Pump Installed: 12-28-04. Setting Depth: 120 feet. Number of Stages: 12.

Pump Test Data: Date Well Tested: 12-28-04. Static Water Level (A): 80 Feet. Pumping Water Level (B): 85 Feet. Drawdown: 5 Feet. Test Pumping Rate: 15+ Gallons Per Minute. Method of Measuring Water Level: Steel Tape. Other (specify): STEEL TAPE ON STRING.

I HEREBY CERTIFY that the above statements are true to the best of my knowledge. E. LANGFORD 0-662, Frank Langford 12 18 2005, Signature of Pump Installer, BY: OLWR