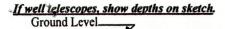
	State Well Report	
1		For Office Use Only:
County: meshalf	Part 1 – Driller's Log	
county	Mississippi Department of Environmental Quality	Aquifer:
Permit #: $6 - 162$	Office of Land and Water Resources	Well #: 4 · 83
Driller: Lang Carpenter	P.O. Box 10631	well #.
Driller: coperer	Jackson, MS 39289-0631	L. S. Elevation:
Date drilling completed: 1-21-59	(601)961-5210	
· · ·	(601)354-6938 (fax)	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.

Department at the above address within 30 days of com			
Information on Well Owner	Well or Borehole Location		
(Landowner if borehole is not for a water well)	Latitude: 34 ° 59 , 06 " Longitude: 89 ° 35 , 15 "		
Owner Name_ Joson Schnelle			
Mailing Address: 129 Louth Lordermon Rd.	Method of Lat/Long (circle one): Conventional Survey,		
Maning Address/	USGS quad, Hand-held GPS, Survey-grade GPS		
1 1 1	SW14 NE 1/4 Sec 23 Twn 15 Rng 460		
Byfiche Mr. 3861 City State Zip Code	Distance Distance Trans		
	<u>3/2</u> Miles <u>unst</u> of <u>Mt. Measont</u>		
Telephone No. (901) 378 - 1557			
Well / Bore	hole Data		
Date drilling started: $\frac{1}{2107}$ Date drilling completed: $\frac{1}{2107}$	4.7 Hole depth: 166' Hole diameter: 8"		
Location of the source of any surface water used for drilling:			
Logs run (circle all applicable): No log run Electric Gamma Ray Name of organization running log(s):			
Purpose of borehole (check one): Water Well X Geotechnical/Geol	ogical Investigation Ground Source Heat Pump		
Seismic Survey Other (describe			
If drilling is not related to water well construction	n, skip the remainder of this block		
Purpose of Well (check one): Home Industrial Public Supply	IrrigationFish CultureOther: Horse Barn		
If a flowing well, method of flow regulation: Valve 0	Other (describe)		
Static Water Level: <u>/6 6</u> feet above or below (circle one)	and surface Date measured: 1-2109		
Method of Measurement (circle one) (steel tape) electric tape	air line other:		
Well depth: $165'$ Well grouted to a depth of 16 feet Type	e of grout (circle one): Neat Cement Bentonite Mix		
Casing length: <u>145</u> feet Casing diameter: <u>4</u>	inches Type of casing: Prc		
	inches Type of screen:PVc		
Screen slot size:	145 feet to 160 feet		
Type of completion (circle all applicable): Gravel packed Under			
Other (describe):			
Top of lap pipe or reduction in casing:feet. If tel			
	RECEIVE		
	Form: OLWR-SWR-1A		

FEB 2 0 2009 BY: OLWR

The sketch below only required for water wells



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)

Description of 1 ormations Encountered	Tiom (dopin)	It (aopui)
0 1	Ground Level	
Surface Soil	0	21
nel, Red Sard	21	42
nel White Sort	42	65
white clay	65	80
Juie white Sand	80	125
Coarse White Sard	125	160
		L

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

Sketch the property layout and include the following: 1) the well aid in locating the well; 3) any roads, power lines, o 4) a north arrow.	ocation; 2) any permanent structures on the property that may r other items that may aid in locating the property and the well;
horth Lerlamon	Re Porte
	Will wall
XIN	linenary Com
Landowner Name: Joson Schnelle	

Form: OLWR-SWR-1A

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. ARNY CARPENTER 6-162 2-6-09

my Corperter

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee

RECEIVED FEB 2 0 2009 BY: OLWR

STATE WELL REPORT				
County: Marshalf Pump I Permit #: 0.162 Mississippi I Driller: Large Corpute Office Date completed: 1-2109 I Copy information from block on Part 1 I This part of the report must be completed by a licensed w	Part 2 Installer's Completion Report Department of Environmental Quality c of Land and Water Resources P.O. Box 10631 Jackson, MS 39289-0631 (601)961-5210 (601)354-6938 (fax) Part 2 Part 2 Installer's Completion Report Department of Environmental Quality c of Land and Water Resources P.O. Box 10631 Jackson, MS 39289-0631 (601)961-5210 (601)354-6938 (fax) Elevation: Elevation: Nater well contractor or a licensed pump installer. A copy of Part 1 of the partment at the above address within 30 days of well completion. Well Location Latitude: Longitude:			
Byfelies Tree 3861 City State Zip Code Telephone No. ()	USGS quad, Hand-held GPS, Survey-grade GPS ¼ ¼ Sec 2 3 T 1 5 R 4 44 Distance Direction Nearest Town			
Pump Type Circle one	Power Type Circle one			
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas			
Burket Piston Turbine	Electric Motor Hand Tractor PTO			
Centrifugal Rotary Flowing Well	Windmill Other (specify):			
Oter merify:	Horse Power Rating of Motor: 2 14P.			
Date Party Installed: 1-21-09	Setting Depth: / 36 feet			
Same Part Capacity: 35 Gallons Per Min	nute Number of Stages: <u>/ 2</u>			
Pump Test Data	Method of Measuring Water Level			
Tar Be Terrei 1-21-09	Circle one			
Feet Below Land Sur	Other (specify):			
Feet Below Land Sur	face For flowing well, measured shut in head:feet			
Gallons Per Min				
Durables riPume Fest minimum 4 hours): 4 ho	burs feet after hours of pumping			
RECEIVED				
HEREEN CERTIFY that the above statements are true to the best of my knowledge. FEB 2 0 2009 LARRY CARPENTER 0-162 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer				

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Form: OLWR-SWR-1B