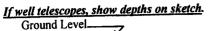
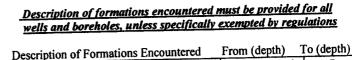
County: Marshall	Part 1 – Driller's Log	For Office Use Only	
Permit #:	Mississippi Department of Environmental Quality Office of Land and Water Resources	Aquifer: <b>7 /35</b>	
Driller: Janes W. Mason	P.O. Box 2309	Well #:	
Date drilling completed: 4-8-11	Jackson, MS 39225 (601)961- 5210	L. S. Elevation:	
Date drilling completed:	(601)961- 5228 (fax)	E-log #:	
State Law requires that this repo	ort be prepared by the license holder responsible for t	the work and filed with the	
<u>Department</u> at the above address Information on Well	ss within 30 days of completion of drilling of the well Owner Well or Bo	or borehole.	
(Landowner if borehole is not		5, 1 anaituda 89 o 40,4	
Owner Name Steve LaC	Latitude: 5 10 50 7	Latitude: $34°56$ , $287$ , Longitude: $87°40$ , $49$ Method of Lat/Long (circle one): Conventional Survey,	
Nailing Address: 384 rive	Method of Lat/Long (circle or	ne): Conventional Survey,	
Maning Address: JUL 1 Ve	USGS quad, Hand-held	GPS Survey-grade GPS	
<u> </u>	5/20 1/4 SE 1/4 Sec 1	Twn 25 Rng 5	
Byhalin r City St	<u>~5 36611</u>	Nearest Town	
	D Miles SE	of Berton	
Telephone No. (662) 838-5-	+12		
	Well / Borehole Data		
Location of the source of any surface wa Method of dosing and volume of Chlori	ine used in drilling and development:		
Location of the source of any surface wa Method of dosing and volume of Chlori Logs run (circle all applicable): No log r Name of organization running log(s): Purpose of borehole (check one): Water V	ater used for drilling:	Other:	
Location of the source of any surface wa Method of dosing and volume of Chlori Logs run (circle all applicable): No log r Name of organization running log(s): Purpose of borehole (check one): Water V Seismic	ater used for drilling:	Other:	
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Form: OLWR-SWR-1A (04/08)

## D135

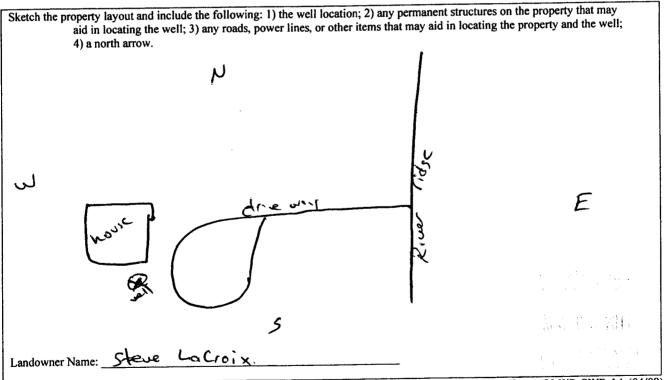
## The sketch below only required for water wells





13 OIL SACICIA	Description of Formations Encountered	From (depth)	lo (depth)
	clay dirt.	Ground Level	35
		35	90
	white soud		
		+	
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			<u> </u>
		+	
			·· +·····

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



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

laws. 5-4-11 Janes W. Mason 0-620

Kusw.N

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee

STATE WELL REPORT				
County:       Image: County:       Pump Installer'         Permit #:       Mississippi Departmen         Driller:       Janei w. Masan       Proprint         Date completed:       4-i3-i1       Jackson	For Office Use Only:s Completion Reportnt of Environmental Qualityand Water ResourcesBox 2309n, MS 39225)961-521051-5228 (fax)Contractor or a licensed pump installer. A copy of Part 1 of theWell #:			
Byhelia MS 38611 City State Zip Code Telephone No. (b62) 838-5412	USGS quad, Hand-held GPS_, Survey-grade GPS_ $\underline{S} \ \underline{W} \ \underline{V} \ \underline{SE} \ \underline{V} \ Sec \ \underline{I} \ \underline{T} \ \underline{\partial} \ \underline{SE} \ \underline{R} \ \underline{SW}$ Distance Direction Nearest Town $\underline{Q} \ \underline{Miles} \ \underline{SE} \ of \ \underline{Sorton}$			
Pump Type Circle oneAir LiftJetSubmersibleBucketPistonTurbineCentrifugalRotaryFlowing WellOther (specify):	Power Type Circle oneDiesel EngineGasoline EngineNatural GasElectric MotorHandTractor PTOWindmillOther (specify):			
Pump Test DataDate Well Tested: $4 - 12 - 11$ Date Well Tested: $4 - 12 - 11$ Static Water Level (A):8Pumping Water Level (B):MFeet Below Land SurfaceDrawdown [(B) - (A)]:MFeet Below Land SurfaceTest Pumping Rate:10Gallons Per MinuteDuration of Pump Test (minimum 4 hours): $24$ hours				
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.         Jenes W Messew       0-620         Print Name of Pump Installer and License No. (if applicable)       Signature of Pump Installer         Form: OLWR-SWR-1B (04/08)				

• • •