County: <u>Morshall</u>
Permit #:
Driller: James w. Mason
Date drilling completed: (0-4-13

Owner Name: __Oon ~ 4

Mailing Address:

Well Owner Information (Landowner if borehole is not for a water well)

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JENNINGS

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STATE WELL REPORT

Part 1 Driller's Log

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225-2309
(601)961-5210

(601)360-0535 (fax)

For Office Use Only:	
Well #:	
Aquifer:	
E-Log #:	

Well or Borehole Location

Latitude: 34°56'35.13 Longitude: 89°42'57.05

Method of Lat/Long (check one): Conventional Survey__

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.

USGS quad, Hand-held GPS, Survey-grade GPS						
NEV 1 5W 11 50 3 7 15 3 5 5W						
City State Zip Code 1314 Miles 54 of Barton						
Telephone No. (901) 305-1151 (Distance) (Direction) (Nearest Town)						
Woll / Borobole Data						
Well / Borehole Data Date drilling started: 10-9-13 Date drilling completed: 10-7-13 Hole depth: 140 Hole diameter: 6314						
Location of the source of any surface water used for drilling:						
Method of dosing and volume of Chlorine used in drilling and development:						
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:						
Name of organization running log(s): ん ト						
Purpose of borehole (circle 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 (circle all applicable) Home Industrial Public Supply Irrigation Fish Culture						
Other (describe):						
If a flowing well, method of flow regulation: Valve _ ~ 1/4 _ Other (describe)						
Static Water Level: 12 feet [above or below] land surface Date measured: 10-7-13 (circle one)						
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe): String / weight						
Well depth: 140 Well grouted to a depth of: 10 feet Type of grout (circle one): Neat Cement Bentonite Mix						
Casing length: 130 feet Casing diameter:inches Type of casing:						
Screen length: 10 feet Screen diameter: 10 inches Type of screen: 10 feet Screen diameter: 10 fe						
Screen slot size: _ old inches Setting depth: From _ 130feet to						
Type of completion (circle all applicable): Gravel packed Underreamed Open hole Natural Development						
Other (describe): NA						
Top of lap pipe or reduction in casing:feet If telescoped or more than one screen, describe on next page						
Form: OLWR-SWR-1A (4/13)						

County: Marshall			or Office Use	
Permit #:			Di45	
The sketch below only required for water wells	Description of formations enc and boreholes, unless specific	<u>ountered</u> ally exen	must be provided in the provided in the provided by regulation in the provided	<u>l for all well</u> ons
f well telescopes, show depths on sketch.	Description of Formations Encour		From (depth)	— To (depth)
Ground Level	clay dist	itered	Ground level	10 (deptin)
	white soud		15	140
	17.			
				J
more than one screen, show location of each on sketch				
more man one screen, snow location of each on sketch				
1) the well location 2) any permanent structures on the property that may a 3) any roads, power lines, or other items that may aid i 4) north arrow	aid in locating the well n locating the property and the well k-lwy	302		
(amy live of				E
	}			
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Surham ed	ا ا ا		3 ⁷⁶ k arre v − 1, , ,	
durbon ed			9EOSN	
Surban ed	house		MECAN NOV 06 2	4.07%
	wen house	S	NOV 062	4.020
ndowner Name: Denny Jenning IEREBY CERTIFY that the well/borehole was drilled, quirements of the Mississippi Department of Enviror	howie	accordan	NOV 06 2	019 M-A
ndowner Name: Deang Jenning HEREBY CERTIFY that the well/borehole was drilled, quirements of the Mississippi Department of Enviror applicable, and state laws.	constructed, and completed in a	accordan	NOV 06 2	019 M->
	howie	accordan pi Depar	NOV 06 2	cable regulations,

STATE WELL REPORT

County: Mers hall

w. Meson

Permit #:

Driller: _

Part 2

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

For Office Use Only:					
Well #:	D145				
Aquifer: _					

Date completed: 18-7-13		n, MS 39225-2309	Aquifer:			
Copy information from block on Part 1	(601)961-5210					
	(601) 360-0535 (fax)				
This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part 1 of the report must be attached and both parts filed with the Department at the above address within 30 days of well completion.						
Well Owner Information		Well Location				
Owner Name: Ochny Jen	-	Latitude: 34 656 35,13 Longitude: 89 42 57.05				
Mailing Address: 348Our	hen 1d	Method of Lat/Long (check one): Conventional Survey,				
		USGS quad, Hand-held GPS, Survey-grade GPS				
By Molice Ms City State	38611	NE 14 5W 14, Sec_	<u> 3 т 15 R 5 აა</u>			
City State	Zip Code	1314 Miles Sw of	Barton (Nearest Town)			
Telephone No. (<u>その</u>) <u>305~115</u>	<u>(</u>	(Distance) (Direction)	(Nearest Town)			
	Pump Ty	oe (circle one)				
Submersible Turbine Air Lift Centrifu						
Date Pump Installed:10-7-13	F	Rated Pump Capacity:	○Gallons Per Minute			
Is This Pump (circle one): New Rep						
	Power Ty	pe (circle one)				
Electric Diesel Gasoline Natural Gas			i i			
Horse Power Rating of Motor: 314	Setting Dept	h: <u> </u>	of Stages: <u>&</u>			
	Pump Test Data	for Non Flowing Well				
Date Well Tested: 10.7-13 Duration of Pump Test (minimum 4 hours): 24 hours						
Static Water Level (A): 12 Feet Below Land Surface Pumping Water Level (B): NITE Feet Below Land Surface						
Drawdown [(B) - (A)]:Feet Below Land Surface Test Pumping Rate: Gallons Per Minute						
Method of measurement (circle one): St			string lineight			
10	•	ta for Flowing Well				
Measured shut in head: <u>~人</u> feet.		_				
Well yieldedGPM with a d	rawdown of	14 feet after 24	hours of pumping			
	Meter	Installation	of the option of the contract			
Meter Manufacturer: ル ト		Meter Serial Number:	NIA HECENTED			
Meter Model Number/Name:ルト		Type of Meter:	INDV 6 E ZHYR I			
Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):						
Installation Date: NAM Meter installed by: NAM						
Is This Meter (circle one): New Repaired Replacement						
Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.						
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.						
Print Name of Pump Installer and Licens	o No. (if and in the	(1-4-13) June 1	ture of Pump Installer			
Print Name of Pump Installer and Licens	e no. (ij applicable) Date [®] Signat	Town OLWD SWD 4B (4/1)			

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