

APR-20-08 08:05

FEED-LAND & WATER

001-004-0000

T-644 P.02

F-442

Marshall

Comp: 6628410251

Frank #: _____

Driller: JOBEN

Date drilling completed: 6-9-10

State Well Report
Part I - Driller's Log
 Mississippi Department of Environmental Quality
 Office of Land and Water Resources
 P.O. Box 10631
 Jackson, MS 39289-0631
 (601)961-6210
 (800)334-6938 (Toll)

For Office Use Only

Agency: 7159

Well #: E174

L. S. Division: _____

Region: _____

State Law requires that this report be prepared by the license holder responsible for the work and filed with the Department of Environmental Quality within 30 days of completion of drilling of the well or borehole.

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

Owner Name: Robert VAN MARD

Mailing Address: 312 TINA DR.
mt. PLEASANT MS.

City: _____ State: _____ Zip Code: _____

Telephone No. () _____

Well or Borehole Location

Latitude: 34° 56' 2.63" N Longitude: 89° 29' 49.46" W

Method of Lat/Long (circle one): Conventional Survey

USGS quad, Hand-held GPS, Survey-grade GPS

SW 1/4 SE 1/4 Sec 3 Twp 25 Range 8W

SE NE SW NW

_____ Miles _____ Direction _____ Nearest Town _____

Well / Borehole Data

Date drilling started: 6-9-10 Date drilling completed: 6-9-10 Hole depth: 200 Hole diameter: 4 1/4"

Location of the source of any surface water used for drilling: neighbor (wells)

Method of casing and volume of Cement used in casing and development: _____

Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other _____

Name of organization testing logs: _____

Purpose of borehole (check one): Water Well _____ Geotechnical/Geological Investigation _____ Ground Source Heat Pump X

Scientific Survey _____ Other (describe) _____

If a flow well, use below to describe well construction, after the completion of this report.

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: _____ feet above or below (circle one) land surface Date measured: _____

Method of Measurement (circle one) steel tape check tape air line other: _____

Well depth: _____ Well grouted to a depth of _____ feet Type of grout (circle one): Most Common Bentonite Mix

Casing length _____ feet Casing diameter: _____ inches Type of casing: _____

Screen length _____ feet Screen diameter: _____ inches Type of screen: _____

Screen slot size: _____ inches Setting depth: From _____ feet to _____ feet

Type of completion (circle all applicable): Gravel packed Unfinished Temporary Open hole Natural Development

Other (describe): _____

Top of top pipe or reduction in casing: _____ feet *If measured at time flow was started, describe on next page*

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APR-20-06 00:00

FORM-LAW & WATER

001-004-0000

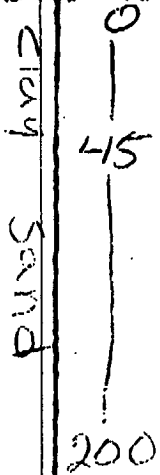
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The sketch below will be used for water logs.

If well screens, show depth on sketch

Ground Level



Description of formation encountered must be recorded for all wells and formations unless specifically exempted by regulation.

Description of Formation Encountered	From (Depth)	To (Depth)
	Ground Level	
Clay	0	45
Sand	45	200

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

Sketch the property layout and include the following: 1) the well location; 2) any permanent structures on the property that may aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and the well; 4) a north arrow.

Landowner Name: _____

Form OLWS-001-1A

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.

Fred Donforth 0-69867 Tal Ryzatto
 Print Name of Responsible Licensee and License No. Role Signature of Licensee