State W	ell Report	For Office Use Only:	
Part 1 - Driller's Log		Aquifer:	
County: Denartmen	Mississippi Department of Environmental Quality		
Permit #: Office of Land	1 / C C OCCUPATION OF LOND ON WATER RESOURCES		
Driller: Lary Cays Mar. Jackson, M.	Jackson, MS 39289-0631 L.		
(601)961-5210	E-log #:	
	54-6938 (fax)		
State Law requires that this report be prepared by the li	cense holder responsible for	the work and filed with the	
Department at the above address within 50 days of com		or porenote.	
Information on Well Owner (Landowner if borehole is not for a water well)		i	
(Landowner y burenote is not you a water water)	Latitude: 34 ° 56 '18	" Longitude: $89 \cdot 23 \cdot 13$ "	
Owner Name Southers Hones	Method of Lat/Long (circle o	one): Conventional Survey,	
115 A Cast Van line are		d GPS, Survey-grade GPS	
	NW 45W 4 Sec_ 2	7 Twn 25 Rng 2 W	
Holly Springs ms. 38635	Distance Direction	Nearest Town	
	Distance Direction 3 Miles	of Slayder	
Telephone No. (66 252 - 3497			
Well / Bo	rehole Data		
Date drilling started: 6-29-05 Date drilling completed: 6-28	7.05 Hole depth: 150	Hole diameter:	
Date driming transfer and the drilling	Well Water		
Location of the source of any surface water used for drilling: Method of dosing and volume of Chlorine used in drilling and dev	relopment: 2 Gel Blesch	to 10:5 Gal. Hully Water	
Logs run (circle all applicable): No log run Electric Gamma Ra Name of organization running log(s):		1	
Purpose of borehole (check one): Water Well_X Geotechnical/Ge	ological Investigation Groun	nd Source Heat Pump	
Seismic Survey Other (descri	be)		
If drilling is not related to water well construct	ion, skip the remainder of this l	block	
Purpose of Well (check one): Home Industrial Public Supp	oly Irrigation Fish Cultur	e Other:	
If a flowing well, method of flow regulation: Valve	Other (describe)		
Static Water Level: 90 feet above or below (circle one) land surface Date measured: 6-29-05			
Method of Measurement (circle one) steel tape electric tape air line other:			
Well depth: 150 Well grouted to a depth of 10 feet Type of grout (circle one) Neat Cement Bentonite Mix			
Casing length: 140 feet Casing diameter: 4 inches Type of casing: PVC			
Screen length: / U feet Screen diameter: U inches Type of screen: PVC			
Screen slot size:			
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 sci	reen, describe on next page	
		Form: OLWR-SWR-1A	
		I OILL OLITICOTIC	

The second secon go, 3**3** 250 BY OLWH

The skets	h halow	only	required for	water wells
i ne skeic	:ก บะเบพ	UILLY	iequiieu joi	matel mens

h.

If well	teles	copes,	show	<u>depths</u>	on	sketch
Gr	ound	Level.		7		

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)
1	Ground Level	
Surjace Soil	0	20
Wed. Red Sand	20	4.5
med White Said	45	70
		9.0
white clay	70	90
White Fire Soul	90	120
White Course Sal	120	150
	<u> </u>	
	·	<u> </u>
		1

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

Sketch the property layout and include the follo aid in locating the well; 3) any roa 4) a north arrow.	owing: 1) the well location; 2) any permanent structures on the property that may ads, power lines, or other items that may aid in locating the property and the well;
Willywest Rd.	House
Í	Property !
	The second secon
	Market & Karle
	The state of the s
Clear Creek Rd.	
Landowner Name: Southers	Honer
	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.

LANNY CANPENTER 0-162 6-29-05 Lany Cayester

Print Name of Responsible Licensee and License No. Date Signature of Licensee

STATE WELL REPORT Part 2 For Office Use Only: **Pump Installer's Completion Report** Mississippi Department of Environmental Quality Aquifer: Office of Land and Water Resources P.O. Box 10631 G-86 Jackson, MS 39289-0631 Date completed: (601)961-5210 Elevation: (601)354-6938 (fax) Copy information from block on Part 1 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 Location** Well Owner Information Latitude: Longitude:____ Method of Lat/Long (check one): Conventional Survey____, USGS quad ____, Hand-held GPS____, Survey-grade GPS____ 4 4 Sec 2 T 25 R 2 W Nearest Town Distance Direction Telephone No. (42) 252 - 3497 3 Miles East of Slayler **Power Type** Pump Type Circle one Circle one Natural Gas Submersible Diesel Engine Gasoline Engine Air Lift Jet Electric Motor Tractor PTO Turbine Hand **Piston** Bucket Other (specify): Rotary Flowing Well Windmill Centrifugal Horse Power Rating of Motor: Other (specify): ___ Date Pump Installed: 6-28-05 Setting Depth: Rated Pump Capacity: / 2 Gallons Per Minute Number of Stages: ____ Method of Measuring Water Level Pump Test Data Circle one Date Well Tested: _ 6- 28-0-5 **Electric Measuring Line** Steel Tape Air Line Static Water Level (A): 90 Feet Below Land Surface Other (specify): _ Pumping Water Level (B): 7 Feet Below Land Surface Drawdown [(B) – (A)]: ______ Feet Below Land Surface For flowing well, measured shut in head: _____feet Test Pumping Rate: _____/ 5 GPM with a drawdown of Gallons Per Minute Well yielded 4 hours of pumping Duration of Pump Test (minimum 4 hours): ______hours

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

LARRY CARPEN + ER 0-16 Z

Print Name of Pump Installer and License No. (if applicable)

Signature of Pump Installer

Form: OLWR-SWR-18