State W	ell Report					
ν	riller's Log	Only:				
	of Environmental Quality Aquifer:					
Permit #: Office of Land a	ad Water Resources	ı [
Driller: . Inc. c. c	ox 10631					
· · · · · · · · · · · · · · · · · · ·	S 39289-0631 L. S. Elevation:					
	-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.						
Information on Well Owner	Well or Borehole Location					
(Landowner if borehole is not for a water well)	34. 66.351 "	5,615,				
Owner Name Andrew Smith	Latitude: 57° 58 551 Longitude: 81° 5	37				
Mailing Address: 3513 5 Sleyden rd	Latitude: 34 ° 56 '351" Longitude: 89 ° 36 '615" Method of Lat/Long (circle one): Conventional Survey,					
Mailing Address: 3513 5 Sleyden rd	USGS quad, Hand-held GPS, Survey-grade G	PS _				
	SE 1/4 Sec 6 Twn 25 Rng	Jun				
Holly Springs MS 38635 City State Zip Code	NE &					
City State Zip Code	Distance Direction Nearest Town 14 Miles 5 of 510460					
Telephone No. (%) 380-9192						
Well / Borehole Data						
Date drilling started: 10-14-05 Date drilling completed: 10-14-05 Hole depth: 245' Hole diameter: 8''						
Location of the source of any surface water used for drilling: Method of dosing and volume of Chlorine used in drilling and development:						
Method of dosing and volume of Chlorine used in drilling and devel	opment: 1					
Logs run (circle all applicable) No log run Electric Gamma Ray Density Sonic Neutron Other:						
Purpose of borehole (check 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 (check one): Home Industrial Public Supply Irrigation Fish Culture Other:						
If a flowing well, method of flow regulation: Valve Other (describe)						
Static Water Level: 140 feet above of below (circle one) land surface Date measured: 10-16-07						
Method of Measurement (circle one) steel tape electric tape air line other: string weight						
Well depth: 345 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix						
Casing length: 335 feet Casing diameter:inches Type of casing:						
Screen length: 30 feet Screen diameter: 4 inches Type of screen: pcc						
Screen slot size: . O (Oinches Setting depth: From	975 feet to 945 feet					
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development						
Other (describe): $\nearrow A$						
Top of lap pipe or reduction in casing:feet. If telescoped or more than one screen, describe on next page						
Form: OLWR-SWR-1A						

DECEMBER DECEMBER

The sketch below only required for water wells	Description of formations encountered		
	wells and boreholes, unless specificall	<u>y exempted by reg</u>	<u>ulations</u>
If well telescopes, show depths on sketch.	Description of Francisco Francisco I	Energy (density)	To (domah)
Ground Level	Description of Formations Encountered	From (depth) Ground Level	To (depth)
	clay dirt.		95
	white Soud	100	100
	unite clay	140	245
	white Soud	1.70	271
			<u> </u>
			1
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İ		-	-
		1	
If more than one screen, show location of each on sketch			
if more than one screen, show location of each on sketch			
sketch the property layout and include the following: 1) the we	Il location: 2) any permanent structures on the	property that may	,

may e well; 4) a north arrow. hause Quell S M Smith. Landowner Name: Andrew

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

Dones U. Masa 0-630	11-10-05	Jens w. Man	
Print Name of Responsible Licensee and License No.	Date	Signature of Licensee	

BRUDLER

THE PERSON

STATE WELL REPORT Part 2 County: MArshall For Office Use Only: Pump Installer's Completion Report Mississippi Department of Environmental Quality Permit #: Aquifer: Office of Land and Water Resources Driller: Joves w Mosow P.O. Box 10631 Jackson, MS 39289-0631 Date completed: 10-16-05 (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: 34.56.351 Longitude: 89.36. 615 Owner Name: Andrew Smith Method of Lat/Long (check one): Conventional Survey____, Mailing Address: 3513 S. Slayder 18 USGS quad , Hand-held GPS , Survey-grade GPS____ SE MNE M Sec 6 T 25 R 2W Distance Direction Nearest Town 'ly Miles 5 of Slayden Telephone No. (94) 380 - 9192 Power Type Pump Type Circle one Circle one Gasoline Engine Natural Gas Submersible Diesel Engine Air Lift **Jet Tractor PTO** Electric Motor Hand Turbine Bucket Piston Other (specify): ___ Rotary Flowing Well Windmill Centrifugal Horse Power Rating of Motor: 1 40-Other (specify): _____ 180, Date Pump Installed: 10 - 16 - 05 Setting Depth: ____ Number of Stages: Gallons Per Minute Rated Pump Capacity: ____ Method of Measuring Water Level **Pump Test Data** Circle one Date Well Tested: 10-16-05 Steel Tape Air Line Electric Measuring Line Static Water Level (A): 140 Feet Below Land Surface Other (specify): String weight Pumping Water Level (B): ~A Feet Below Land Surface Drawdown [(B) - (A)]: Feet Below Land Surface For flowing well, measured shut in head: GPM with a drawdown of Test Pumping Rate: Well yielded _ Gallons Per Minute ∂ન __hours of pumping Duration of Pump Test (minimum 4 hours): feet after I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

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

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

Signature of Pump Installer

Form: OLWR-SWR-1B

