port and Well Log	For Office Use Only:
t of Environmental Quality	Aquifer: Well #: <u>H-188</u>
Office of Land and Water Resources	
	L. S. Elevation:
	E-log #:
	the Department within
	and the second
	Location
(# C	
Method of Lat/Long (circle o	ne): Conventional Survey,
USGS quad, Hand-held	I GPS, Survey-grade GPS
500 1/ NE 1/ Sec 11.	Twn 35 Rng 5w
Distance Direction	Nearest Town
314 Miles NW	of worsow
ll Data	······································
ly Irrigation Fish Cultur	e Other:
ate well drilling completed:	2-9-05
	2-9-05
one) land surface Date measu	red:
tape air line other: _	String [weight
Well grouted to a depth	of <u>(O</u> feet
inches Type of casir	ng: puc
inches Type of scree	en: ΛυC
	140 feet
omfeet to	
Inderreamed Telescoped	Open hole Natural Development
If telescoped or more than or	e screen, describe on back of page
a Kay Density Some Hour	
e with all applicable requirements of	the Mississippi Department of
ations and state laws.	
$\frown$	<u>а</u> Д
Jons w.	of Water Well Contractor
Signature	of water well Contractor
	RECEIVED
	Box 10631 AS 39289-0631 1961-5210 4-6938 (fax) e driller in detail and filed with Latitude: 34.50,366 Method of Lat/Long (circle o USGS quad, Hand-held Swizzer Kec 11 Distance Direction 314 Miles Musc II Data bly Irrigation Fish Cultur Pate well drilling completed: tape air line other: well grouted to a depth Mix inches Type of casir Well grouted to a depth Mix feet to Underreamed Telescoped If telescoped or more than or a Ray Density Sonic Neutr re with all applicable requirements of ations and state laws.

BY: OLWR

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H-188

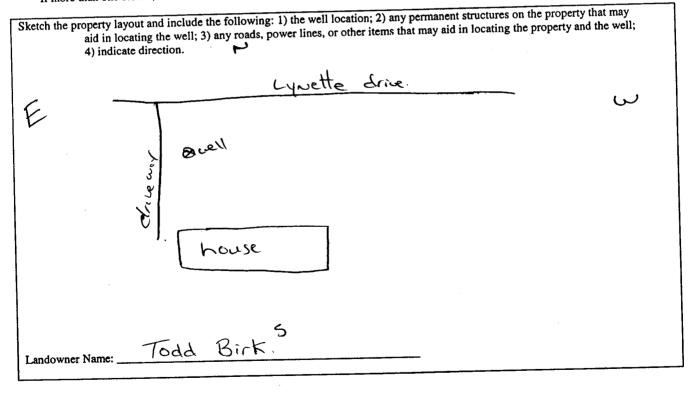
If wer telescopes please sketch below and show depths.

Ground Level

3 F

Description of Formations Encountered	From	To
Cley dirt	0	15
while Sond	15	70
	70	85
grovel	85	92
	92	115
	115	140
while soud		1
		1
		+
		-+

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



yours w. Mon

Signature of Water Well Contractor

MAR 0 3 2005 BY: OLWR

	STATE W	ELL REPORT		
		Part 2	For Office Use Only:	
County: MArshall	Pump Installer's Completion Report Mississippi Department of Environmental Quality Office of Land and Water Resources		Aquifer:	
Permit #:			· ·	
Driller: Jones U. Mason		Box 10631 MS 39289-0631	Well #: <u>H-188</u>	
Date completed: $\frac{\partial - 9 - 0.5}{\partial - 9 - 0.5}$	(601)961-5210 (601)354-6938 (fax)		Elevation:	
This report should be prepared by the p	ump installer in deta	ail and filed with the Departme	nt within 30 days of the	
installation of pump. Well Owner Information		Well Location		
Owner Name: Todd Birk		Latitude: 34.50.362	_Longitude: 89, 41, 59;	
Mailing Address: 219 Lynette			Method of Lat/Long (circle one): Conventional Survey,	
		USGS quad, Hand-held GPS, Survey-grade GPS		
Byholio MS City State	38611		11 Twn 35 Rng 5ω	
City State	Zip Code	Distance Direction	Nearest Town	
112030 1200			of worsow	
Telephone No. (462838 6787				
Pump Type		P	ower Type	
Circle one			Circle one	
Air Lift Jet	Submersible	Diesel Engine Gasol	ine Engine Natural C	
Bucket Piston 7	Furbine	Electric Motor Hand		
Centrifugal Rotary	Flowing Well		r (specify):	
Other (specify):			or: <u>314</u>	
Date Pump Installed:		Setting Depth:8	○feet	
Rated Pump Capacity:	Sallons Per Minute	Number of Stages:	<u>l</u> ]	
Pump Test Data		Method of N	leasuring Water Level	
-			Circle one	
Date Well Tested: <u><math>\partial - 9 - 05</math></u>		Air Line Electric M		
Static Water Level (A): <u>45</u> Feet B		Other (specify):	g weight	
Pumping Water Level (B): <u>~A</u> Feet B	elow Land Surface			
Drawdown [(B) – (A)]: $\[ \sim A \]$ Feet B			shut in head: $\underline{\gamma} A \underline{f}$	
Test Pumping Rate: 2	_		GPM with a drawdown of	
Duration of Pump Test (minimum 4 hours): _	<u>24</u> hours	feet after	hours of pump	
·····				
I HEREBY CERTIFY that the above stateme	ents are true to the bes	st of my knowledge.		
			Mason	

RECEIVED MAR 0 3 2005 BY: OLWR