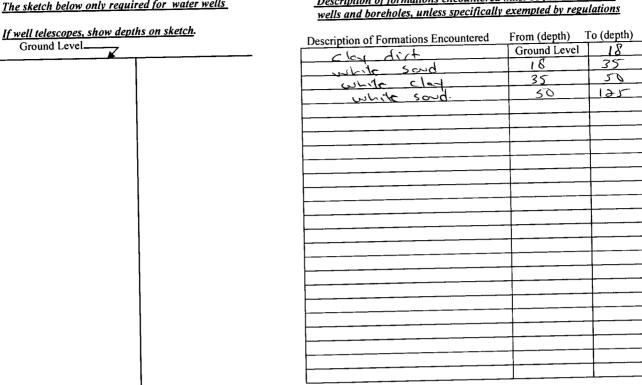
State W	ell Report			
	Driller's Log	For Office Use Only:		
Mississinni Denartmer	nt of Environmental Quality	Aquifer:		
	nd Water Resources Box 2309	Well#: <u>H352</u>		
	n, MS 39225			
	961- 5210 1 5238 (fox)	L. S. Elevation:		
(601)96	1- 5228 (fax)	E-log #:		
State Law requires that this report be prepared by the lic				
Department at the above address within 30 days of comp Information on Well Owner		or borehole.		
(Landowner if borehole is not for a water well)				
Owner Name Homes Sweet Homes	Latitude: $59 \circ 98$, 25	" Longitude: <u>89°40,640"</u>		
Mailing Address: Lot 187 Moores Loop	Method of Lat/Long (circle or	ne): Conventional Survey,		
	USGS quad, Hand-held	GP3, Survey-grade GPS		
Moores plantation subdivision	515 1/ SE 1/4 Sec 18			
Bytalia MS 35611 City State Zip Code	NW NE 24			
City State Zip Code	$\begin{array}{ccc} \text{Distance} & \text{Direction} \\ \hline 3 & \text{Miles} & \underline{S \in} \\ \end{array}$	of worrow.		
Telephone No. (901) 488 - 2297				
Well / Bore	hole Data			
Date drilling started: <u>(-18-09</u> Date drilling completed: <u>(-18-09</u>	A Hole depth: 125'	Hole diameter: <u>6314</u>		
Location of the source of any surface, water used for drilling:	ALA			
Location of the source of any surface water used for drilling:	opment:			
Logs run (circle all applicable). No log run Electric Gamma Ray	Density Sonic Neutron	Other:		
Name of organization running log(s):				
Purpose of borehole (check one): Water Well Geotechnical/Geol	ogical Investigation Ground	Source Heat Pump		
Seismic Survey Other (<i>describe</i>	A~~			
If drilling is not related to water well constructio				
Purpose of Well (check one): HomeIndustrial Public Supply Irrigation Fish Culture Other:				
If a flowing well, method of flow regulation: Valve O	ther (describe)			
Static Water Level: 45 feet above or below (sircle one) land surface Date measured: 6-25-09				
Method of Measurement (circle one) steel tape electric tape air line other: <u>String Ineight</u>				
Well depth: 125 Well grouted to a depth of <u>()</u> feet Type	of grout (circle one): Neat Cem	ent Bentonite Mix		
Casing length: 105 feet Casing diameter: 4	inches Type of casing:	puc		
Screen length: <u></u>		<i>'</i>		
Screen slot size: , <u>()</u> inches Setting depth: From _	105 feet to	75 feet		
Type of completion (circle all applicable): Gravel packed Under	reamed Telescoped Open	hole Natural Development		
Other (describe): <u>A</u>				
Top of lap pipe or reduction in casing:	lescoped or more than one scre	en, describe on next page		
		Form: OLWR-SWR-1A (04/08)		

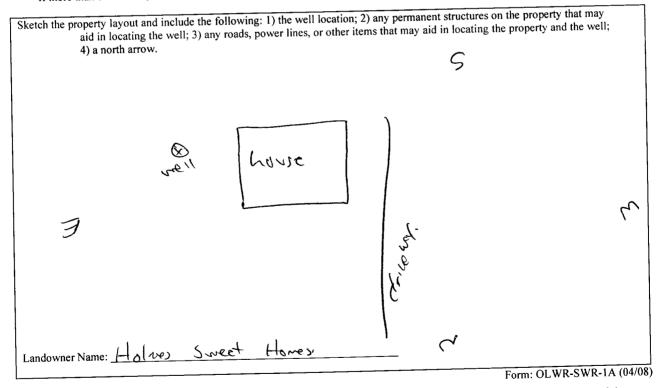
ب ب

JUL 1 5 2009 BY: OLWR Description of formations encountered must be provided for all

The sketch below only required for water wells



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



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. Jores us Moson 0-620 7-13-09. Print Name of Responsible Licensee and License No. Signature of Licensee Date

JUL 1 5 2009

RECEIVED

BY: OLWR

STATE	WELL	REPORT
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County: Marshall	Part 2 Pump Installer's Completion Report	For Office Use Only:
Permit #:	Mississippi Department of Environmental Quality Office of Land and Water Resources	Aquifer:
Driller: Janes W. Mosan	P.O. Box 2309	Well #: H352
Date completed: $6 - 35 - 09$	Jackson, MS 39225 (601)961-5210	
Copy information from block on Part 1	(601)961-5228 (fax)	Elevation:

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: Holmes Sweet Homes Mailing Address: Lot 187 Moores Loop	Latitude: $34 - 43 - 575$ Longitude: $89 \cdot 40 - 640$ 58'' Method of Lat/Long (check one): Conventional Survey,
moores plantation subdivision	USGS quad, Hand-held GPS, Survey-grade GPS
Byhalie M3 38611 City State Zip Code	$\frac{5\times5}{NW} = \frac{14}{NE} = \frac{13}{24} = \frac{13}{N} = \frac{13}{24}$ Distance Direction Nearest Town
Telephone No. (901) 488 - 2297	314 Miles SE of worsow.

Pump Type Circle one		Power Type Circle one			
Air Lift	Jet	Submersible	Diesel Engine	Gasoline Engine	Natural Gas
Bucket	Piston	Turbine	Electric Motor	Hand	Tractor PTO
Centrifugal	Rotary	Flowing Well	Windmill	Other (specify):	
Other (specify):	· · <u>- · · · · · · · · · · · · · · · · ·</u>		Horse Power Rating of Motor:3/4		
Date Pump Installed:	6-25-	09	Setting Depth:	08	feet
Rated Pump Capacity	y:(O	Gallons Per Minute	Number of Stages:	88	

Pump Test Data	Method of Measuring Water Level Circle one	
Date Well Tested: 6-75-09 Static Water Level (A): 45 Feet Below Land Surface	Air Line Electric Measuring Line Steel Tape	
Pumping Water Level (B):Feet Below Land Surface	Other (specify): <u></u>	
Drawdown [(B) – (A)]:Feet Below Land Surface Test Pumping Rate:C Gallons Per Minute	Well yieldedGPM with a drawdown of	
Duration of Pump Test (minimum 4 hours): 24 hours	feet after <u>Ə\</u> hours of pumping	

I HEREBY CERTIFY that the above statements are true to the best o	f my knowledge.	
Jones W-Majon 0-620	Signature of Pump Installer	
Print Name of Pump Installer and License No. (if applicable)	Form: OLWR-SYRECCEIVE	:[
	JUL 1 5 2009	ļ

BY: OLWR