State Well Report					
County: Morshall	Part 1 – I	Priller's Log	For Office Use Only:		
County. 1410/341071	Mississippi Department of Environmental Quality		Aquifer:		
Permit #:	Office of Land and Water Resources		Well #: 5-271		
Driller: Jones w. Moson	P.O. Box 10631		•		
·	Jackson, MS 39289-0631		L. S. Elevation:		
Date drilling completed: 12-7-07	(601)961-5210 (601)354-6938 (fax)		E-log#:		
	(001)33	4-0930 (lax)	L-10g #.		
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 C		Well or Bo	rehole Location		
(Landowner if borehole is not fo	r a water well)	34 . 49 , 400	(" 1in.d 9 9 0.39 7.26 (1)"		
Owner Name Tungani (av	Latitude: 41 , 41		Longitude: 07 97 QQ 7		
Owner Name To your Cox Latitude: 34 • 49 , 486" Longitude: 89 • 3 Method of Lat/Long (circle one): Conventional Su		ie): Conventional Survey,			
Mailing Address: 372 docker	\		_		
	•		GPS, Survey-grade GPS		
2		SE 1/4 NKW/4 Sec 18	Twn 35 Rng 4w		
Byvolia Mi City Stat	38611	1 1 0			
City Stat	e Zip Code	Distance Direction	Nearest Town of War Saw		
Telephone No. (662) 838-6850)	Willes OF	01 20015012		
Well / Borehole Data					
n		No	(3/		
Date drilling started: 12-7-07 Date dri	lling completed: ()	Hole depth: 155	Hole diameter: 674		
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 development:					
Logs run (circle all applicable): No log run: Electric Cannus Ray Density Sonic Neutron Change Ray Name of organization running log(s):					
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): HomeIndustrial 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: Date measured: Date measured:					
Method of Measurement (circle one) steel tape electric tape air line other: String [weight.					
Well depth: 15 T Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix					
Casing length: 145 feet Casing diameter: 1 inches Type of casing: 145					
Screen length: 10 feet Screen diameter: 4 inches Type of screen: poc					
Screen slot size:					
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development					
Other (describe):					

feet. If telescoped or more than one screen, describe on next page

Top of lap pipe or reduction in casing: _

Form: OLWR-SWR-1A

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The sketch below only required for water wells

Ground Level-

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)
clay dist.	Ground Level	25
white soud	95	40
white clay	40	70
white soud	70	USS
	,	
		ļ
		<u></u>

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

Sketch the property layout and include the following: 1) the well location aid in locating the well; 3) any roads, power lines, or other 4) a north arrow.	n; 2) any permanent structures on the property that may items that may aid in locating the property and the well;
S Chan	5
hou	
Landowner Name: Tonny (ox.	- Chile

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. Print Name of Responsible Licensee and License No.

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STATE WELL REPORT

Part 2

County: Marshall

Pump Installer's Completion Report Office of Land and Water Resources

For Office Use Only:		
quifer:		
rell #: J 271		
evation:		

Permit #: Mississippi Department of Environmental Quality Driller Jones w. Mose. P.O. Box 10631 Jackson, MS 39289-0631 Date completed: (2-7-0) (601)961-5210 (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 Owner Information Well Location Latitude: 34.49.400 Longitude: 89.39 - 864 Tonny (ox Owner Name: Mailing Address: 373 dacker Method of Lat/Long (check one): Conventional Survey USGS quad , Hand-held GPS , Survey-grade GPS SE 4 NW 4 Sec 18 T 35 R 4W Direction Distance Nearest Town 1'18 Miles SE of Warsow Telephone No. (66) 838-6350 **Pump Type** Power Type Circle one Circle one Air Lift Submersible Gasoline Engine Jet Diesel Engine Natural Gas **Bucket** Piston Turbine Electric Motor Hand Tractor PTO Centrifugal Flowing Well Other (specify): Rotary Windmill Other (specify): Horse Power Rating of Motor: Date Pump Installed: 12-7-02 Setting Depth: Rated Pump Capacity: _____ (6 Gallons Per Minute Number of Stages: Pump Test Data Method of Measuring Water Level Circle one Date Well Tested: (2-7-07 Electric Measuring Line Air Line Steel Tape Static Water Level (A): 68 Feet Below Land Surface String | moight Other (specify): _ Pumping Water Level (B): Peet Below Land Surface Drawdown [(B) – (A)]: $\nearrow A$ Feet Below Land Surface For flowing well, measured shut in head: Test Pumping Rate: 6 Gallons Per Minute Well yielded 0 GPM with a drawdown of hours of pumping Duration of Pump Test (minimum 4 hours): NH feet after

I HEREBY CERTIFY that the above statements are true to the best of	my knowledge.
Jones w Moson 0-600	Garo w Men
Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer

Form: OLWR-SWR-1B

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