<u>Marshall</u>	CA-A- WALL D	4		
	State Well Report		For Office Use Only:	
County: Benton	Part 1 – Driller's Log Mississippi Department of Environmental Quality		Aquifer:	
Permit #:	Office of Land and Water Resources		1 - 1201	
Driller: Joses W. Mason	P.O. Box 10631		Well #:	
	Jackson, MS 39289-0631		L. S. Elevation: Q9	
Date drilling completed:	(601)961-5210		E-log #:	
	(601)354-6938 (fa	A)	E-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			rehole Location	
(Landowner if borehole is not f	or a water well)	24 42 2-	1	
Owner Name Kevin John	Latitude:)9 ° 92 '27'	T' Longitude: 89° 16 ' "	
Mailing Address 617 Betton	Method o	f Lat/Long (circle or	Longitude: 89°18, 111", abe): Conventional Survey,	
	USC	GS quad, Hand-held	GPS, Survey-grade GPS	
P.H. C Mc	201.50	المحمد 4 Sec	Twn 45 Rng w	
Potts Comp MS	te Zin Code Distance	SE Direction	Nearest Town of Ashland.	
·		Miles 5	of Ashlow.	
Telephone No. (662) 333-77	50			
Well / Borehole Data				
Date drilling started: 1-5-06 Date drilling completed: 1-5-06 Hole depth: 75' Hole diameter: 8'				
Leaving Silvers of the Control of th				
Method of dosing and volume of Chlorine used in drilling and development:				
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/Geological Investigation Ground Source Heat Pump				
Seismic Survey Other (<i>describe</i>)				
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: 45 feet above or below (circle one) land surface Date measured: 1-5-06				
Method of Measurement (circle one) steel tape electric tape air line other: String weight.				
Well depth: 75 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix				
Casing length: 55 feet Casing diameter:inches Type of casing:				
Screen length: 30 feet Screen diameter: 4 inches Type of screen: 50				
Screen slot size: , OlO inches Setting depth: From 55 feet to 75 feet				
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development				

Other (describe):

Top of lap pipe or reduction in casing:

Form: OLWR-SWR-1A

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

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The sketch below only required for water wells

If well telescopes, show depths on sketch.

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 dirt. 10d Sond while sond	Ground Level	10
led Soud	(6	30
while soud	30	22
		ļ

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

Sketch the property layout and include the following: 1) the well location; 2) any permanaid in locating the well; 3) any roads, power lines, or other items that may a 4) a north arrow.	ent structures on the property that may id in locating the property and the well;
⊗ ~	ell
Landowner Name: Kevin Julison.	>
	Form: OLWP SWP 1

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

Print Name of Responsible Licensee and License No.

Signature of Licensee RECEIVED

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BY: OLWR

STATE WELL REPORT Part 2 County: Acartais For Office Use Only: **Pump Installer's Completion Report** Permit # Mississippi Department of Environmental Quality Aquifer: Office of Land and Water Resources P.O. Box 10631 Well #: Jackson, MS 39289-0631 Date completed: 1-5-08 (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 Owner Information Well Location Latitude: 34-42-274 Longitude: 89-18-111 Method of Lat/Long (check one): Conventional Survey____, Owner Name: Mailing Address: USGS quad , Hand-held GPS , Survey-grade GPS 2 1/2 Sec 200 Ne Distance _Miles _S∽ Telephone No. (662) 333- 7750 Pump Type Power Type Circle one Circle one Air Lift Jet Submersible Diesel Engine Gasoline Engine Natural Gas Bucket Piston Turbine Electric Motor **Tractor PTO** Hand Centrifugal Rotary Flowing Well Windmill Other (specify): Other (specify): Horse Power Rating of Motor: Date Pump Installed: 1 - 5-06 Setting Depth: 12 Rated Pump Capacity: Gallons Per Minute Number of Stages: Pump Test Data Method of Measuring Water Level Circle one 1-5-06 Date Well Tested: Air Line Electric Measuring Line Steel Tape 45 Static Water Level (A): Feet Below Land Surface String (weigh Other (specify): Pumping Water Level (B): Feet Below Land Surface Drawdown [(B) – (A)]: Feet Below Land Surface For flowing well, measured shut in head: Test Pumping Rate: Gallons Per Minute Well vielded GPM with a drawdown of Duration of Pump Test (minimum 4 hours): feet after hours of pumping 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)

Form: OLWR-SWR-1B

Signature of Pump Installer

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BY: OLWR