County: Pearl River
Permit #:
Driller: M. Ehael S. Haverd
Date drilling completed: 11-28-05

## **State Well Report**

## Part 1

Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 10631 Jackson, MS 39289-0631 (601)961-5210

(601)354-6938 (fax)

For Office Use Only:	
Aquifer:	
Well #: <b>D-92</b>	
L. S. Elevation:	
E-log #:	

State Law requires that this report be prepared by the driller in detail and filed with the Department within

30 days of completion of drilling of the well.	with a work with the control of the			
Well Owner Information	Well Location			
Owner Name Meru. Kriteman	Latitude: 30 ° 56 ' 034" Longitude 89 ° 23 '454"			
Mailing Address:	Method of Lat/Long (circle one): Conventional Survey,			
49 Roy Road	USGS quad, <u>Gand-held GPS</u> Survey-grade GPS			
Lumberton MS 39455 City State Zip Code Telephone No. (601) 996-8647	Distance Direction Nearest Town			
Well	L Data			
Purpose of Well (circle one) Flome Industrial Public Supply	Irrigation Fish Culture Other:			
Date well drilling started: 11-28-05 Date well drilling completed: 11-28-05				
If flowing, method of flow regulation: Valve Other (describe)				
Static Water Level:feet above or below (circle one) land surface Date measured:11-28-05				
Method of Measurement (circle one) electric tape air line other:				
Hole depth: Well depth: Well grouted to a depth of feet				
Type of grout (circle one): Cement Bentonite				
Casing length: 61 feet Casing diameter: 2 inches Type of casing: PUC SCH YO				
Screen length: 10 feet Screen diameter: 2 inches Type of screen: WOP PUC				
Screen slot size: , ooc inches Setting depth: From 61 feet to 71 feet				
Type of completion (circle all applicable): Gravel packer Underreamed Telescoped Open hole Natural Development				
Other (describe):				
Top of lap pipe or reduction in casing:feet. If telescoped or more than one screen, describe on back of page				
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:				
Name of organization running log(s):				
I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi				
Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.				
Michael S. Havaid DOWN 0-65	13 Mitheld Hat			
Print Name of Water Well Contractor and License No.	Signature of Water Well Contractor			

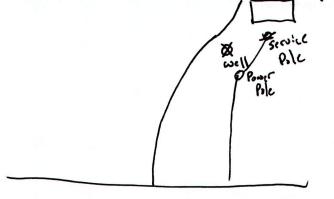
If well telescopes please sketch below and show depths.

Ground Level

Description of Formations Encountered	From	To
Topsand.	0	6
Saild (med)	6	46
Clay	46	48
Sand (med)	48	53
Clau	23	56
Sand (med	54	71
		T
	_	+-
		+-

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 permanent structures on the property that may
aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and the well;
4) indicate direction.
Dwell'ng



Landowner Name: Meru. Kritzman

Signature of Water Well Contractor

RECEIVED
JAN 0 3 2006

BY: OLWR

## STATE WELL REPORT

## County: Pearl Riser Permit #: Driller: Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 10631 Jackson, MS 39289-0631

For Office Use Only	
Aquifer:	
Well #:	D-92
Elevation:	

	1)961-5210 54-6938 (fax) Elevation:		
This report should be prepared by the pump installer in definition of pump.	tail and filed with the Department within 30 days of the		
Well Owner Information	Well Location		
Owner Name: Meru. Kritzman	Latitude: 30 56 0   Longitude: 872327		
Mailing Address:	Method of Lat/Long (circle one): Conventional Survey,		
49 Roy Road	USGS quad, Hand-held GPS, Survey-grade GPS		
Lumberton MS 39455 City State Zip Code	1/41/4 Sec 27 Twn 15 Rng 1/4		
City State Zip code	Distance Direction Nearest Town		
Telephone No. (601) 796 - 8047	Miles _ 5 & of Lumberton		
Pump Type Circle one	Power Type Circle one		
Air Lift Submersible	Diesel Engine Gasoline Engine Natural Gas		
Bucket Piston Turbine	Electric Motor Hand Tractor PTO		
Centrifugal Rotary Flowing Well	Windmill Other (specify):		
Other (specify):	Horse Power Rating of Motor:		
Date Pump Installed: 11-78-05	Setting Depth:feet		
Rated Pump Capacity: Gallons Per Minute	Number of Stages:		
Pump Test Data	Method of Measuring Water Level Circle one		
Date Well Tested: 11-28-65	Circle one		
Static Water Level (A): 22 Feet Below Land Surface	Air Line Electric Measuring Line Steel Tape		
Pumping Water Level (B): _30 _Feet Below Land Surface	Other (specify):		
Drawdown [(B) – (A)]: Feet Below Land Surface	For flowing well, measured shut in head:feet		
Test Pumping Rate: Callons Per Minute	Well yielded GPM with a drawdown of		
Duration of Pump Test (minimum 4 hours):hours	feet afterhours of pumping		
I HEREBY CERTIFY that the above statements are true to the best	of my knowledge.		
Michael S. Havard 0-673 Minh little			
Print Name of Pump Installer and License No. (if applicable)	Agnature of Pump Installer		