	State Well Report	E Office Lies Only
County: Pearl River	Part 1 – Driller's Log	For Office Use Only:
ounty: / Earl Doct	Mississippi Department of Environmental Quality	Aquifer: 546
Permit 4:	Office of Land and Water Resources	Well #:
Driller: 0-785	P.O. Box 10631	well #:
	Jackson, MS 39289-0631	L. S. Elevation:
Date drilling completed: 9-30-09	(601)961-5210	P. Ison
	(601)354-6938 (fax)	E-log ≑:
	be prepared by the license holder responsible for within 30 days of completion of drilling of the wel	
Information on Well O		orehole Location
(Landowner if borehole is not for	r a water well)	1' 56.21.711
wher Name Donna Lad	Latitude: <u>38 ° 41, '06</u>	4. Longitude 89 ° 21. 714
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ailing Address: 95 Ray	Ladner Kd.	
	USGS quad, Hard-hel	d GPS Survey-grade GPS
	55 NTN 73	Twn 45 Rng 14W
Portarville M	15 39470 NE	Iwn Kng I Iwn
Poplarville M City State	e Zip Code Distance Direction	Nearest Town
		of
elephone No. (601) 795 - 7		
	Well / Borehole Data	
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RECEIVED 0CT 1 2 2009 BY: OLWR

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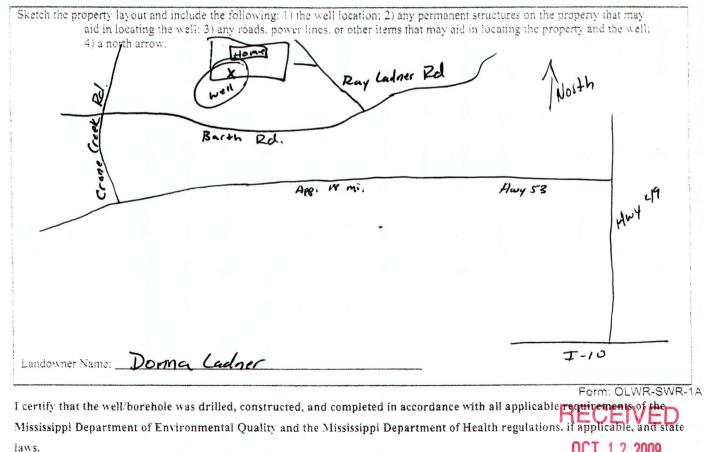
The sketch below only required for water wells

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	Ground Level	
Sand	5	20
Clay	20	180
Sand	180	190
Clay	190	220
Sand	220	260

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



MALVIN WAGNON 0-785 9-30-09 Al

OCT 1 2 2009 Mati Wo Signature of Licens

Print Name of Responsible Licensee and License No.

Date

Country VEARL LIVER	Part 2		
	Pump Installer's Completion Report	For Office Use Only:	
Pennit #	Mississippi Department of Environmental Quality Office of Land and Water Resources	Aquifer:	
Driller: WAGNON WELL See.	P.O. Box 10631	<u> </u>	
Date completed: 10/07/69	Jackson, MS 39289-0631 (601)961-5210	Well #: <u>\$46</u>	
Copy information from block on Part 1	(601)354-6938 (fax)	Elevation:	
This part of the report must be completed b	y a licensed water well contractor or a licensed pump	installer. A conv of Part 1 of the	
report must be attached and both parts filed	t with the Department at the above address within 30	days of well completion.	
Well Owner Informatio		ell Location	
Wher Name: KEITH DOWNA	LADRER Latitude: 30° 41. 069	Longitude: 89° 21. 714	
failing Address: 95		one): Conventional Survey	
Ray ladas		ld GPSSurvey-grade GPS	
Ray Ladner I Poplarville M	- 26/172 USGS quad, Hand-hel		
City State	S 39470 SE 4 NE 4 Sec.	23 TAS R 14W	
	Distance Direction	Nearest Town	
elephone No. (60) 795-7	2072 Miles	of	
Pump Type	P	ower Type	
Circle one		Circle one	
dir Lift Jet	Submersible Diesel Engine Gasol	linc Engine Natural Gas	
lucket Piston	Turbine Electric Motor Hand		
entrifugal Rotary		r (specify):	
Other (specify):	Horse Power Rating of Moto	Dr:5	
Date Pump Installed: 10/07/09	Setting Depth:		
Lated Pump Capacity: <u>22</u>	Sallons Per Minute Number of Stages:		
Pump Teşt Data	Macha J - CA	leasuring Water Level	
Date Well Tested: 10/07/09		Circle one	
	Air Line Electric M	easuring Line Steel Tape	
Static Water Level (A):Feet E	Below Land Surface	Subaring sine Steer rape	
Pumping Water Level (B): 100 Feet B	elow Land Surface		
Drawdown [(B) - (A)]: Feet E		Alu in Lond	
	1	shut in head:feet	
Cest Pumping Rate:(		GPM with a drawdown of	
Duration of Pump Test (minimum 4 hours):	_24_hoursfeet after	hours of pumping	