0:	
County: Perry	-
Permit #:	_ N
Driller: Miky & Ward	1
Date drilling completed: 1/-15-5	2

State Well Report

Part 1 - Driller's Log

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 #: _ # - 56
L. S. Elevation:
E-log #:

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 comp	oletion of drilling of the well or borehole.			
Information on Well Owner (Landowner if borehole is not for a water well)	Well or Borehole Location			
Owner Name (Wendell Penton	Latitude:°' Longitude:°"			
Mailing Address: PUBOX 754	Method of Lat/Long (circle one): Conventional Survey,			
Mailing Address: 1000 /3 /	USGS quad, Hand-held GPS, Survey-grade GPS			
0 1 11 20:00 2				
Beaumet Mz. 39423 City State Zip Code				
Telephone No. ()	Distance Direction Nearest Town 2 Miles of Leavengustes			
Well / Bore	hole Data			
Date drilling started 1/-15-67 Date drilling completed 1/-15-	67 Hole depth: 96 Hole diameter: $4/2$			
Location of the source of any surface water used for drilling:	OUE			
Method of dosing and volume of Chlorine used in drilling and development	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/Geolo	ogical 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): Home Industrial Public Supply Irrigation Fish Culture Other:Other:				
If a flowing well, method of flow regulation: Valve On	ther (describe)			
Static Water Level:				
Method of Measurement (circle one) steel tape electric tape air line other:				
Well depth: 90 Well grouted to a depth of feet Type of grout (circle one): Neat Cement Bentonite Mix				
Casing length: 80 feet Casing diameter: 2 inches Type of casing: 40 40				
Screen length: 10 feet Screen diameter: 2 inches Type of screen: PUC c-rapped				
Screen slot size:inches Setting depth: Fromfeet tofeet tofeet				
Type of completion (circle all applicable): Type of completion (circle all applicable): 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 next page				

Form: OLWR-SWR-1A

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From (depth) To (depth)

Ground Level

<u>Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations</u>

Description of Formations Encountered

<u> </u>	
If more than one screen, show location of each on sketch etch the property layout and include the following: 1) the well loc	cation; 2) any permanent structures on the property that may
aid in locating the well; 3) any roads, power lines, or o4) a north arrow.	other items that may aid in locating the property and the well;
4) a norm arrow.	
	<u>.</u>
	New Augusta
	New Co
	988
Wengot	99E LPD
Wenget	988 LPD
Wengst	98E LPD
Wenget	988 LPd
Wenget (Wenget	99E LPD
wengst over	9,9 E L. Rd
(ayta)	988 LPD
	99E LPd
	988 LRD
downer Name: Wendell Penton	GSE LPA
adowner Name: Wendell Penton tify that the well/borehole was drilled, constructed, and complete	Form: OLWR-SWR-1A eleted in accordance with all applicable requirements of the
ndowner Name: Wendell Penton tify that the well/borehole was drilled, constructed, and complete	GSE LPA
ndowner Name: Werdell Penton tify that the well/borehole was drilled, constructed, and completissippi Department of Environmental Quality and the Mississippi Departmental Quality and Departmental	Form: OLWR-SWR-1A letted in accordance with all applicable requirements of the cippi Department of Health regulations, if applicable, and state Michael Ratures
downer Name: Werdell Penton tify that the well/borehole was drilled, constructed, and complissippi Department of Environmental Quality and the Mississi	Form: OLWR-SWR-1A leted in accordance with all applicable requirements of the sippi Department of Health regulations, if applicable, and state

The sketch below only required for water wells

If well telescopes, show depths on sketch.
Ground Level

STATE WELL REPORT

Part 2

County:

Pump Installer's Completion Report

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 #:	H-56			
Elevation:				

(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: Longitude: Mailing Address: Method of Lat/Long (check one): Conventional Survey USGS quad____, Hand-held GPS___, Survey-grade GPS_ 2 Miles NE of Telephone No. (**Pump Type Power Type** Circle one Circle one Air Lift Submersible Diesel Engine Gasoline Engine Natural Gas Bucket Piston Turbine Electric Motor Hand Tractor PTO Centrifugal Flowing Well Rotary Windmill Other (specify): Other (specify): Horse Power Rating of Motor: Date Pump Installed: //-/5-07 Setting Depth: Rated Pump Capacity: Gallons Per Minute Number of Stages: **Pump Test Data** Method of Measuring Water Level Circle one Date Well Tested: Air Line Electric Measuring Line Steel Tape Static Water Level (A): 20 Feet Below Land Surface Other (specify): Pumping Water Level (B): 3 D Feet Below Land Surface Drawdown [(B) – (A)]: / P Feet Below Land Surface For flowing well, measured shut in head: Test Pumping Rate: Gallons Per Minute Well yielded GPM with a drawdown of 11/2 hours of pumping Duration of Pump Test (minimum 4 hours): feet after

I HEREBY CERTIFY that the above statements are true to the best Michael Right of 408 Print Name of Pump Installer and License No. (if applicable)	Michael Robriston
Finit Name of Fump instance and License No. (If applicable)	Signature of Pump Installer
	Form: OLWR-SWR-1B

BY OLWR