| County: Atte | Part 1 - I | Vell Report Oriller's Log | For Office Use Only: |
|--|--|--|--|
| Permit #: | Mississippi Department of Environmental Quality Office of Land and Water Resources | | Aquifer: 0-269 |
| Driller: Fitzgerald Well Sena | | Box 10631 | Well #: 0-267 |
| | Jackson, M | IS 39289-0631 | L. S. Elevation: |
| Date drilling completed: 3-18-09 | (601)961-5210 | | F.1. # |
| L. | (601)33 | 4-6938 (fax) | E-log #: |
| State Law requires that this report Department at the above address | within 30 days of comp | ense holder responsible for t eletion of drilling of the well | he work and filed with the or borehole. |
| Information on Well (| | | rehole Location |
| (Landowner if borehole is not fo | or a water well) | Latitude: 310 . 12 . 17.6 | "Longitude: 90° 28 . 2.6" |
| Owner Name DiANE TWAGE | 007 Walde Dal | Method of Lat/Long (circle on | Conventional Survey |
| Mailing Address: wardlaw Rd, | | | |
| · | | | GPS, Survey-grade GPS |
| Milamb City Stat | | ¼¼ Sec 23 | |
| Čity Stat | te Zip Code | Distance Direction | |
| Telephone No. () | | Miles | DI |
| | Well / Bore | hole Data | |
| Date drilling started: 3-19-09 Date dri | Illing completed: 3-18-0 | 19. Hole depth: P5 | Hole diameter: 8" |
| Location of the source of any surface water Method of dosing and volume of Chloring | r used for drilling: used in drilling and devel | opment: | |
| Logs run (circle all applicable): No log run Name of organization running log(s): | | | The second secon |
| Purpose of borehole (check one): Water W | ellGeotechnical/Geolo | ogical Investigation Ground | Source Heat Pump |
| Seismic S If drilling is not related | SurveyOther (describe) to water well construction | 1, skip the remainder of this blo | ck |
| Purpose of Well (check one): Home | | | |
| If a flowing well, method of flow regulation | n: Valve Ot | ther (describe) | |
| Static Water Level:feet abo | ove or below (circle one) la | and surface Date measured: | 3-18-09. |
| Method of Measurement (circle one) | The same sape | air line other: | |
| Well depth: 85 Well grouted to a dep | oth of 10 feet Type | of grout (circle one): Weat Ceme | Bentonite Mix |

411

Setting depth: From_

Other (describe):

inches

Underreamed

Screen diameter: ___

Casing length: 75 feet Casing diameter:

Type of completion (circle all applicable): Gravel packed

inches

Screen length: 10 feet

Top of lap pipe or reduction in casing:

Screen slot size: .OL

Form: OLWR-SWR-1A

_feet

Natural Development

Type of casing: Pvc

Type of screen: Pve

Telescoped Open hole

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



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

| Ground Level | Description of Formations Encountered | From (depth) Ground Level | To (dept |
|--|--|--|----------|
| | Cluy- | O | 20 |
| | Sandy s/une | 20 | 60 |
| | (lwy- | 60 | 70 |
| | cource Son d | 20 | 85 |
| | | | |
| | | | - |
| | | | - |
| | | | - |
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| | Manufacture control control of the c | | |
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| | | | |
| | | | |
| | | | |
| | | The second secon | - |
| If more than one screen, show location of each on sk | | The state of the s | L |
| aid in locating the well; 3) any roads, power 4) a north arrow. | he well location; 2) any permanent structures on the p r lines, or other items that may aid in locating the prop | roperty that may berty and the well | |
| 4) a north arrow. | nnes, or other nems that may aid in locating the prop | roperty that may perty and the well | |
| B will will i tours. Dowell | nnes, or other nems that may aid in locating the prop | reporty that may berty and the well | |
| 4) a north arrow. | nnes, or other nems that may aid in locating the prop | perty that may berty and the well | |
| Building Site. | nnes, or other nems that may aid in locating the prop | reporty that may berty and the well | |
| Building Site. > [lowner Name: PiAne Tunage. | And completed in accordance with all applicable re | Form: OLWR- | SWR-1A |
| Building Site. > [lowner Name: PiAne Tunage. | And completed in accordance with all applicable re | Form: OLWR- | SWR-1A |
| Building Sitt. Sitt. downer Name: DiAme Tumage. ify that the well/borehole was drilled, constructed, assippi Department of Environmental Quality and the | and completed in accordance with all applicable re | Form: OLWR- | SWR-1A |
| Building Site. > [lowner Name: PiAne Tumage. Ify that the well/horehole was drilled, constructed, and the second constructed constructed, and the second constructed co | and completed in accordance with all applicable re | Form: OLWR- | SWR-1A |

The sketch below only required for water wells

If well telescopes, show depths on sketch.

STATE WELL REPORT

Permit #:

Part 2

Pump Installer's Completion Report
Mississippi Department of Environmental Quality
Office of Land and Water Resources

| | For Office Use Only: |
|-------|----------------------|
| Aqui | fer: |
| Well | #: D-269 |
| Eleva | ation: |

| Driller: Pitzyrald Well fine | P.O. Box 10631 Jackson, MS 39289-0631 Well #: D-269 |
|--|---|
| Date completed: 3-18-09- | (601)961-5210 |
| Copy information from block on Part 1 | (601)354-6938 (fax) Elevation: |
| | ed water well contractor or a licensed pump installer. A copy of Part 1 of the |
| Well Owner Information | Department at the above address within 30 days of well completion. Well Location |
| Owner Name: DIANE Turnage. | Latitude: 31° 12' 12.6" Longitude: 90° 28' 3.6 |
| | |
| Mailing Address: wardlum Rd | Method of Lat/Long (check one): Conventional Survey, |
| | USGS quad, Hand-held GPS, Survey-grade GPS |
| M Yonb MS City State Zip | 1/4 1/4 Sec T R |
| City State Zip | Code |
| | Distance Direction Nearest Town |
| Telephone No. () | Miles of |
| Pump Type | Power Type |
| Circle one | Circle one |
| Air Lift Jet Submersil | Diesel Engine Gasoline Engine Natural Gas |
| Bucket Piston Turbine | Hand Tractor PTO |
| Centrifugal Rotary Flowing | Well Windmill Other (specify): |
| Other (specify): | Horse Power Rating of Motor: 42 |
| Date Pump Installed: 3-18-09 | Setting Depth: 80′ feet |
| | |
| Rated Pump Capacity: 12 Gallons Pe | r Minute Number of Stages: 8 |
| Pump Test Data | Method of Measuring Water Level |
| Date Well Tested: | Circle one |
| Static Water Level (A):Feet Below Lan- | Air Line Electric Measuring Line Steel Tape |
| | Other (specify): |
| Pumping Water Level (B):Feet Below Land | 1 Surface |
| Drawdown [(B) – (A)]:Feet Below Lane | d Surface For flowing well, measured shut in head:feet |
| Test Pumping Rate:Gallons Per | r Minute Well yieldedGPM with a drawdown of |
| Duration of Pump Test (minimum 4 hours): | hourshours of pumping |
| I HEREBY CERTIFY that the above statements are tru | te to the best of my knowledge. |
| BIAL Edzerald Oza | Red Strall |
| Print Name of Pump Installer and License No. (if applied | cable) Signature of Pump Installer |

Form: OLWR-SWR-1B

