	State Well Report	
County: PIKe	Part 1 – Driller's Log	For Office Use Only:
Missis	ssippi Department of Environmental Quality	y Aquifer:
	Office of Land and Water Resources	Well #: E 307
Driller Titzgerald Well Spices	P.O. Box 2309 Jackson, MS 39225	
Date drilling completed: 724-12	(601)961- 5210	L. S. Elevation:
	(601)961- 5228 (fax)	E-log #:
State Law requires that this report be pre	pared by the license holder responsible for	
Department at the above address within	30 days of completion of drilling of the w	vell or borehole.
Information on Well Owner	Well or	Borehole Location
(Landowner if borehole is not for a water	r well)	7.5 Longitude: 90° 22 . 16.6
Owner Name Jimmy Webb		7.0 Longitude. 10 07 10
Owner Name Timmy Webh  Mailing Address: Gloson Rd.	Method of Lat/Long (circle	e one): Conventional Survey,
ividinis Additos: O O O O V	USGS mad Hond-h	eld GPS, Survey-grade GPS /
	<b>{</b>	
millout no	NE%NW% Sec_	4 Twn 3N Rng 8 E
m (lond) ms. City State	Zip Code Distance Direction	n Nearest Town
	l Miles	of
Telephone No. ()		
	Weli / Borehole Data	
Date drilling started: 7-24-12 Date drilling com	npleted: 7-24-10 Hole depth: 188	_ Hole diameter: 8"
Location of the source of any surface water used for Method of dosing and volume of Chlorine used in a		• .
Logs run (circle all applicable): No log run Electri	•	
Name of organization running log(s):		
Purpose of borehole (check one): Water WellG	eotechnical/Geological Investigation Grou	ind Source Heat Pump
Seigmic Survey	Other (describe)	
	well construction, skip the remainder of this	block
Purpose of Well (check one): Home Industrial	Public Symphy Imigation Fish Culture	Other in
If a flowing well, method of flow regulation: Valve	Other (describe)	
Static Water Level: 101 feet above or be	low (circle one) land surface Date measured	1: 7-24-12.
Method of Measurement (circle one) steel tape	electric tape air line other:	
Well depth: 188 Well grouted to a depth of 10	•	ement Bentonite Mix
Casing length:/	er: Y' inches Type of casing:	Pu
Screen length: 10 feet Screen diameter		
Screen slot size:O(0inches Setting		
Type of completion (circle all applicable): Gravel p		n hole Natural Development
Other (d	lescribe):	
rob or reb hibe or reggerous in casing.	feet. If telescoped or more than one scr	ven, describe on next page

Form: OLWR-SWR-1A (04/08)



Ground Level    Ground Level	WEST SCHOOLOGGEST STORY	ths on sketch.	Description of	Formations Encountered	From (depth)	To (depth)
If more than one screen, show location of each on sketch    Court   Co	Ground Level		Description of .			
If more than one screen, show location of each on sketch  ketch 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) a north arrow.  Landowner Name:				(10-1,	0	
If more than one screen, show location of each on sketch  (custe Sand 170 188  (custe Sand 17				Sand.	70	
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Permit #:  Driller: Fitzleal & Lellfere Office of Land a P.O.  Date completed: 7-24-12 (601)	the above address within 30 days of wen completion.  Well Location
Owner Name:	Latitude: 31° 13 5).5 Longitude: 90° 22 16.6"  Method of Lat/Long (check one): Conventional Survey  USGS quad, Hand-held GPS, Survey-grade GPS /4 Sec/4 T
Air Lift Jet Submersible  Bucket Piston Turbine  Centrifugal Rotary Flowing Well  Other (specify):  Date Pump Installed: 724-12  Rated Pump Capacity: 35 Gallons Per Minute	Power Type Circle one Circle one Circle one Circle one Casoline Engine  Natural Gas  Electric Motor  Hand  Tractor PTO  Windmill  Other (specify):  Horse Power Rating of Motor:  Setting Depth:  140  feet  Number of Stages:
Pump Test Data  Date Well Tested:Feet Below Land Surface  Pumping Water Level (B):Feet Below Land Surface  Drawdown [(B) - (A)]:Feet Below Land Surface  Test Pumping Rate:Gallons Per Minute  Duration of Pump Test (minimum 4 hours):hours	Method of Measuring Water Level Circle one Air Line Electric Measuring Line Steel Tape Other (specify):  For flowing well, measured shut in head:  Well yielded  GPM with a drawdown of  feet after hours of pumping
I HEREBY CERTIFY that the above statements are true to the best but a False of Care Print Name of Pump Installer and License No. (if applicable)	

Signature of Pump Installer
Form: OLWR-SWR-1C (07-09)
RECEIVED
AUG 2 2 2012
BY: OLWR