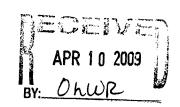
State V	Vell Report	
Part 1 -	Part 1 - Driller's Log	
Mississinni Denartme	ent of Environmental Quality Aquifer:	
Permit #: 0 - 586 Office of Land and Water Resources P.O. Box 2309 Well #: K- 155		
l	n, MS 39225 L. S. Elevation:	
	1901-0210	
(44.)21	E-log #:	
State Law requires that this report be prepared by the license holder responsible for the work and filed with the Department at the above address within 30 days of completion of drilling of the well or borehole.		
Department at the above address within 30 days of com Information on Well Owner	Well or Borehole Location	
(Landowner if borehole is not for a water well)		
Owner Name Molvin Hudson	Latitude:' Longitude:'	
Mailing Address: 1492, Blutan	Method of Lat/Long (circle one): Conventional Survey,	
Joyka Ins	USGS quad, Hand-held GPS, Survey-grade GPS	
39657 City State Zip Code	Distance Direction Nearest Town 1	
1010120212	Distance Direction Nearest Town  S Miles S of Mag mous	
Telephone No. ( ) 3 U C 5 C 6	V	
Well / Borehole Data		
Date drilling started: 3-3-09 Date drilling completed: 3-3-09 Hole depth: 160 Hole diameter: 7		
Location of the source of any surface water used for drilling:  Method of dosing and volume of Chlorine used in drilling and development:  3		
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:		
Purpose of borehole (check one): Water WellGeotechnical/Geological Investigation Ground Source Heat Pump		
Seismic Survey Other (describe)		
Purpose of Well (check one): HomeIndustrial Public Supply Irrigation Fish Culture Other:		
If a flowing well, method of flow regulation: Valve Other (describe)		
Static Water Level: 90 feet above of below (circle one) land surface Date measured: 3-3-09		
Method of Measurement (circle one) steel tape electric tape air line other:		
Well depth: 160 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix		
Casing length: 140 feet Casing diameter: 4 inches Type of casing: 600		
Screen length: 20 feet Screen diameter: 4 inches Type of screen: PVC		
Screen slot size: .008 inches Setting depth: From 140 feet to 160 feet		
Type of completion (circle all applicable): Gravel packed 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 (04/08)		



## Description of formations encountered must be provided for all The sketch below only required for water wells wells and boreholes, unless specifically exempted by regulations If well telescopes, show depths on sketch. From (depth) Description of Formations Encountered Ground Level Ground Level 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) a north arrow. Form: OLWR-SWR-1A (04/08) I certify that the well/horehole was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state JAMES WELLS 0586 Signature of Licensee Print Name of Responsible Licensee and License No.

## STATE WELL REPORT Part 2 County: For Office Use Only: **Pump Installer's Completion Report** Mississippi Department of Environmental Quality Aquifer: Office of Land and Water Resources P.O. Box 2309 Well #: Jackson, MS 39225 Date completed: (601)961-5210 Elevation: (601)961-5228 (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 Location Well Owner Information Longitude: Owner Name: Latitude: Method of Lat/Long (check one): Conventional Survey\_ Mailing Address: USGS quad\_\_\_\_, Hand-held GPS\_\_\_, Survey-grade GPS\_\_\_ Direction Distance Telephone No. Power Type **Pump Type** Circle one Circle one Natural Gas Gasoline Engine Submersible Diesel Engine Air Lift Tractor PTO Electric Motor Hand Bucket Piston Turbine Centrifugal Flowing Well Windmill Other (specify): Rotary Horse Power Rating of Motor: Other (specify): Setting Depth: Date Pump Installed: Gallons Per Minute Rated Pump Capacity: Number of Stages: Method of Measuring Water Level **Pump Test Data** Circle one Date Well Tested: Steel Tape Electric Measuring Line Air Line \_Feet Below Land Surface Static Water Level (A): Other (specify): \_ Pumping Water Level (B): 130 Feet Below Land Surface Drawdown [(B) - (A)]: / O Feet Below Land Surface For flowing well, measured shut in head: \_\_

I HEREBY CERTIFY that the above statements are true to the best	of my knowledge.
JAMES NEWS 0-586	James Walls
Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer

Well yielded

/S Gallons Per Minute

Test Pumping Rate: \_\_

Duration of Pump Test (minimum 4 hours): \_

APR 1 0 2009

BY: OLUR

GPM with a drawdown of

hours of pumping