State V	Vell Report					
County () [Part 1 -]	Driller's Log	For Office Use Only:				
Mississippi Departmen	Mississippi Department of Environmental Quality					
Uffice of Land	and Water Resources	Well #:				
Driller: HTEGORI WY STANCE, P.O. Jackson M.	Box 10631 MS 39289-0631	,				
Date drilling completed: 5-8-0/ (601))961-5210	L. S. Elevation:				
(601)35	54-6938 (fax)	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.						
Information on Well Owner	Well or Bo	rehole Location				
(Landowner if borehole is not for a water well)	Intimude 31 . 0 . 21	" Longitude 90 . 21,238				
Owner Name Just Truxillo.	Latitude	Longitude 7 5 1 2 1 2 1				
Mailing Address: Esseveld State Ine Rd	Method of Lat/Long (circle or	ne): Conventional Survey,				
	USGS quad, Hand-held	GPS, Survey-grade GPS				
منصد ف أ						
City State Zip Code	Distance Direction					
Telephone No. ()	Miles	of				
Weli / Bore	choic Data					
Date drilling started: 5-8-07 Date drilling completed: 5-8-0		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:						
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 WellGeotechnical/Geological Investigation Ground Source Heat Pump						
Seismic Survey Other (describe)						
If drilling is not related to water well construction		ock				
Purpose of Well (check one): HomeIndustrial Public Supply	y Irrigation Fish Culture	Other:				
If a flowing well, method of flow regulation: Valve Other (describe)						
Static Water Level:feet above or below (circle one) land surface Date measured:						
Method of Measurement (circle one) steel tape electric tape air line other:						
Well depth: 120 Well grouted to a depth of 10 feet Type of grout (circle one) Neat Cement Bentonite Mix						
Casing length: 110 feet Casing diameter: 110 inches Type of casing: 110						
Screen length: 10 feet Screen diameter: 4" inches Type of screen: PUC						
Screen slot size: 1012 inches Setting depth: From 10 feet to 120 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: _

Form: OLWR-SWR-1A

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

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		4-11	5
The sketch below only required for water wells	Description of formations encountered	d must be provided	for all
f well telescopes, show depths on sketch.	wells and boreholes, unless specificall	y exempted by reg	ulations
Ground Level	Description of Formations Encountered	From (depth)	To (depth
	·	Ground Level	
	clu-f.	0	20
	Sand	20	40
	(luzi	40	60
	Sand	⊥ 6∂	180
	Sandy	80	100
	lause Sand	100	120
			ļ
			
			
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		<u> </u>	
			
			
l			
		T	
more than one screen, show location of each on sketci			*************************************
aid in locating the well; 3) any roads, power lin 4) a north arrow. Emerald Stule Ing Rd	- (amp	Stubeline Rd	
downer Name: Tack Trukillo, tify that the well/borehole was drilled, constructed, and issippi Department of Environmental Quality and the	d completed in accordance with all applicable Mississippi Department of Health regulations,	Form: OLWR requirements of i	he
ad Februard 029. 5-	1 4 /	/	- 31AIT

Date

Print Name of Responsible Licensee and License No.

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Signatury of Licensee

STATE WELL REPORT

County: Permit #:_ 1)

Part 2

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

For Office Use Only:			
Aquifer;			
Well #: L-165			
Elevation:			

Driller: Ittzevild kell sere, Date completed: 5-8-67.	P.O. Box 10631 Jackson, MS 39289-0631 (601)961-5210			L-165
Copy information from block on Part 1 (001)334-0938 (18x) 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 wit	h the Department at the	above address wi		
Well Owner Information		٠ .	Well Location	-
Owner Name: Tuck Trux. 10	L	Latitude: 31° 0'21" Longitude: 90°21'23.8"		
Mailing Address: Enetald Stufe	he Rd Me	Method of Lat/Long (check one): Conventional Survey,		
	U	SGS quad, H	land-held GPS,	Survey-grade GPS
		1/2 1/4 24	SecT	D
City State	Zip Code	74 74	Sec1	
	Di	stance Di	rection Near	est Town
Telephone No. ()		Miles	of	
Pump Type Circle one			Power Type	
Circle one	_		Circle one	
Air Lift Jet Sub-	mersible Di	esel Engine	Gasoline Engine	Natural Gas
Bucket Piston Turb	pine	ectric Motor	Hand	Tractor PTO
Centrifugal Rotary Flor	wing Well Wi	indmill	Other (specify):	· · · · · · · · · · · · · · · · · · ·
Other (specify):	Ho	rse Power Rating	of Motor: 1/2	
Date Pump Installed: 5-8-07	Se	tting Depth:	100'	feet
Rated Pump Capacity: 12 Gallo	ons Per Minute Nu	umber of Stages: _	8	
Pump Test Data		Meth	od of Measuring V Circle one	Vater Level
Date Well Tested:			Choic one	
Static Water Level (A):Feet Below	v Land Surface		ctric Measuring Lin	
Pumping Water Level (B):Feet Below	Land Surface	(openi)		11.11.11.11.11.11.11.11.11.11.11.11.11.
Drawdown [(B) - (A)]:Feet Below	v Land Surface Fo	r flowing well, me	easured shut in head	:feet
Test Pumping Rate:Gallo	ns Per Minute W	Well yieldedGPM with a drawdown of		
Duration of Pump Test (minimum 4 hours):	hours	fe	et after	hours of pumping
I HEREBY CERTIFY that the above statements a	are true to the best of my	knowledge.	.10	

Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

Form: FURE VELVEL MAY 29 2007 BY: OLWR