	State Well	Report		
County: Pike	Part 1 – Driller's Log		For Office Use Only:	
534 1 54 1 7	Mississippi Department of Environmental Quality		Aquifer:	
Permit #:	Office of Land and W P.O. Box 2		Well #:	
Driller: Teme Singleton	Jackson, MS			
Date drilling completed: 5/19/09	(601)961-5		L. S. Elevation:	
	(601)961- 522	o (lax)	E-log #:	
State Law requires that this report				
Department at the above address v			or borehole.	
(Landowner if borehole is not for	a water well			
Owner Name Tom Greci	I ati	tude: 31 ° 63 '31	" Longitude: 90° 13',54"	
	. 14-4	hod of Lat/Long (circle or	nel Conventional Survey	
Mailing Address: 232 Alba	NIG 10.	Method of Lav Long (circle one): Conventional Survey, GOOGLEGYH USGS quad, Hand-held OPS, Survey-grade GPS		
		USGS quad, Hand-held	GPS, Survey-grade GPS	
1 .15 - 1 2	70000	5 1/4 Sec 9	Twn N Rng 8 E	
Luling LA State	7:0070			
		ance Direction Miles	Nearest Town of OSVKA	
Telephone No. (504) 711 - 00	- 280		-U-1/	
	Well / Borehole I	Data ,	.,	
Date drilling started: 5/19 Date drill	· · · · · · · · · · · ·	70	4"	
·			~	
Location of the source of any surface water used for drilling: Private well (Sincle for) Method of dosing and volume of Chlorine used in drilling and development: 1 gallon Blench (000 Shillor				
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 Wel	1 Geotechnical/Geological	Investigation Ground	Source Heat Pump	
	rveyOther (describe)			
If drilling is not related to	o water well construction, ski	the remainder of this bl	ock	
Purpose of Well (check one): Home Inc	lustrial Public Supply I	rigation Fish Culture	Other:	
If a flowing well, method of flow regulation	Valve MA Other (lescribe) \mathcal{N}/\mathcal{V}		
Static Water Level: 48 feet above or below (circle one) land surface Date measured: 5/21/09				
Method of Measurement (circle one) steel tape electric tape air line other:				
Well depth: 70 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix				
Casing length: 60 feet Casing diameter: 4 inches Type of casing: PVC Schol. 40				
Screen length: 10 feet Screen diameter: 4 inches Type of screen: 10 Jo Hell				
Screen slot size: v0/> inches Setting depth: From 0 0 feet to 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 (04/08)

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

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The sketch	holow	onh	ronuirod	for	water wells
I NE SKEUN	veww	Only .	required	JUT	water weas

If well telescopes, show depths on sketch.

Ground Level.

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

Description of Formations Encountered	From (depth)	To (depth)
TOPSOIL	Ground Level	1
RED CLAY		14
BRAVEL	14	16
SANDY RED CLAY	16	20
YOHOW CIAY/SANDY	ည်ဝ	42
medium SAND BEN	42	55
COARSE SHOWS + P-GRAVA	- 55	70
,		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		ļ

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. Out le Gate
\text{\tinz{\text{\tinx{\text{\tinx{\tinx{\tint{\text{\tinx{\tinx{\tint{\text{\tinx{\tin\
METAL & 100' -> 10' BATAGE RU 10'
Oriverny WELL
Landowner Name: Jom Greci

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

I certify that the well/borehole 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

laws.

Print Name of Responsible Licensee and License No.

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STATE WELL REPORT

County: Dike Permit #: Driller: Teme Sins/etan Date completed: 5/21/09 Copy information from block on Part 1	Part 2 Pump Installer's Completion Report Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 2309 Jackson, MS 39225 (601)961-5210 (601)961-5228 (fax)		For Office Use Only: Aquifer: Well #: 203 Elevation:	
This part of the report must be completed report must be attached and both parts file				
Well Owner Informat	ion	Well	Location	
Owner Name: Jom Greci		Latitude: 3/033/	Longitude: 90 13 54	
Mailing Address: 232 Albang Dr.		Method of Lat/Long (check one): Conventional Survey, G005k e977h USGS quad, Hand-held GPS, Survey-grade GPS		
Luling LA 70070 City State Zip Code		SE 1/2 SE 1/2 Sec 9 T IN R 8E		
Telephone No. (504) 7 \rightarrow		Distance Direction Miles \mathcal{NE} of	Nearest Town OSYEM MS	
Pump Type Circle one			ver Type rcle one	
Air Lift Jet	Submersible	Diesel Engine Gasoline	e Engine Natural Gas	
Bucket Piston	Turbine	Electric Motor Hand	Tractor PTO	
Centrifugal Rotary	Flowing Well	Windmill Other (s	specify):	
Other (specify):		Horse Power Rating of Motor:		
Date Pump Installed: $\frac{5/\lambda}{109}$		Setting Depth: 60 feet		
Rated Pump Capacity: 20	Gallons Per Minute	Number of Stages:		
D T4 D.4		M-A-1-636-		
Pump Test Data Date Well Tested: 5/5/05			suring Water Level role one	
. ,	D. I. I. C.	Air Line Electric Meas	suring Line Steel Tape	
Static Water Level (A): 46 Feet Below Land Surface		Other (specify):		
	Below Land Surface		,	
Drawdown [(B) – (A)]: Feet Below Land Surface		For flowing well, measured shut in head: _~/\sum_feet		
Test Pumping Rate: Gallons Per Minute		Well yieldedGPM with a drawdown of		
Duration of Pump Test (minimum 4 hours):	hours	feet after	hours of pumping	
I HEREBY CERTIFY that the above statements are true to the best of my knowledge				
Teme Singleton Print Name of Pump Installer and License N	Io (if applicable)	Signature of Pump Ins	tolk	
Time realise of Lamb disparies and Piceuse I	o. (II applicable)	Signature of Lumb dis		

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