County: $F_1 \land C$ Part 1 - Driller's Log Permit #:	4	State Well Report	For Office Use Only:
Permit #. Messissipi Department of Environmential Quality Aquife:	County: Pike	Part 1 – Driller's Log	
Driller: $\frac{1}{1} \frac{1}{2} 1$			sality Aquifer: L 223
Driller: fright development Date drilling completed: 2-24-11/2 State Law requires that this report be prepared by the license holder responsible for the work and filed with th Department at the above address within 30 days of completion of drilling of the well or borehole. Isformation on Well Owner Well or Borehole is not for a water well) Owner Name			337-12 4.
Date drilling completed: 2-34-11/- (601)961-5221 (60) L. S. Elevatore: 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. Well or Borehole Location 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. Well or Borehole Location 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. Well or Borehole Location Mailing Address: Pitc 93 S Latitude: 31° • 4′ - 53.5″ Longitude: 70° 23.5′. T Mailing Address: Pitc 93 S Latitude: 31° • 4′ - 53.5″ Longitude: 70° 23.5′. T Mailing Address: Pitc 93 S Latitude: 31° • 4′ - 53.5″ Longitude: 70° 23.5′. T Mailing Address: Pitc 93 S Latitude: 31° • 4′ - 53.5″ Longitude: 70° 23.5′. T Method of LavLong (circle one): Conventional Survey. USGS quad, Hand-held GPS, Survey. grade GPS Nw 45 4 % See 12 Twn / M Reg SE Date drilling started: 274′.1′ Date drilling: Method of basing and volume of Chlorine used in drilling and development: Location of the source o	Driller: Fitzpevald Well Leve	P.O. Box 2309	wen #:
Date annung completed: 2 ≤ 2 ≤ 2 (fax) E-log #:	· · · · · · · · · · · · · · · · · · ·		L. S. Elevation:
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. 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. State Law requires that this report be a water well) Owner Name	Date drilling completed: $\mathcal{L} - \mathcal{L} \mathcal{T} - \mathcal{I} \mathcal{T}$		
Department at the above address within 30 days of completion of drilling (if the rel or borehole. Information an Well Owner (Landowner if borehole is not for a water well) Owner Name			
Well or Borehole Location Milling Address: Alte 93 5 Well or Borehole Colspan="2">Coventional Survey, grade GPS Milling Address: Alte 93 5 Well / Borehole Data Direction New 4.5 £ w Sec 1.9 Twn // N Rng & E City 'S State Zip Code Well / Borehole Data Direction Nearest Town Miles and relifing completed: 2 - 24'-11 Date drilling started: 2 - 24'-11 Date drilling completed: 2 - 24'-11 Hole diameter: 5'1' Location of the source of any surface water water used for drilling: Melth of low regulation: water well constructi	State Law requires that this report	t be prepared by the license holder responsil	ble for the work and filed with the
(Landowner if borchole is not for a water well) Owner Name 4 \vert N_1 (\vert \vert	فالجميسية ببران المراجع المتحدين والمراجع والمتحال والمتحد والمتحد والمتحد والمتحد والمتحد والمتحد والمراجع والمحاجب والمتحد		
Downer Name $411/(N_1)^{-1}$ $411/(P_1)^{-1}$ Mailing Address: $P_1 e P_3 S$ Mailing Address: $P_1 e P_3 e P_3 S$ Mailing Address: $P_1 e P_3 e P_1 e P$			
Mailing Address: $\underline{A} \mid \underline{K} \in \underline{93} \leq \underline{3}$ Method of LaVLong (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS $\underline{M} \subseteq \underline{M} \subseteq \underline$		em Latitude: <u>31° 4</u>	. <u>53.</u> Longitude: <u>90°</u> <u>33</u> , <u>9</u>
Image: all 4 MS. City State Zip Code Prephone No. (Method of Lat/Long (
Image: City Mailes Distance Direction Nearest Town Telephone No. (· ····································	USGS quad, Ha	
City State Zip Code Distance Direction Nearest Town Telephone No. (marialin	NW 1/5 / se	c <u>19</u> Twn <u>/N</u> Rng <u>8</u> E
Telephone No. (City Sta	te Zin Code Distance Dizz	ction Nearest Town
Well / Borehole Data Well / Borehole Data Date drilling completed: 2-34-1/1 Hole depth: 148' Hole diameter: 511 Location of the source of any surface water used for drilling:		Miles	
Date drilling started: 2.24.11 Date drilling completed: 2-34-11 Hole depth: 148 Hole diameter: 611 Location of the source of any surface water used for drilling: Location of the source of any surface water used for drilling: Location of the source of any surface water used for drilling: Location of the source of any surface water used in drilling and development: Location of the source of any surface water used in drilling and development: Location of the source of any surface water used in drilling and development: Location of the source of Chlorine used in drilling and development: Location of the source of Chlorine used in drilling and development: Location of the source of the source of the source Heat Pump Seismic Survey_Other (describe) If drilling is not related to water well construction. skip the remainder of this block Purpose of Well (check one): Home Industrial_Public Supply_ Irrigation_ Fish Culture	Telephone No. ()		
Date drilling started: 2.24.11 Date drilling completed: 2-34-11 Hole depth: 148 Hole diameter: 611 Location of the source of any surface water used for drilling: Location of the source of any surface water used for drilling: Location of the source of any surface water used for drilling: Location of the source of any surface water used in drilling and development: Location of the source of any surface water used in drilling and development: Location of the source of any surface water used in drilling and development: Location of the source of Chlorine used in drilling and development: Location of the source of Chlorine used in drilling and development: Location of the source of the source of the source Heat Pump Seismic Survey_Other (describe) If drilling is not related to water well construction. skip the remainder of this block Purpose of Well (check one): Home Industrial_Public Supply_ Irrigation_ Fish Culture		Wall / Bambala Data	·····
Seismic SurveyOther (describe) If drilling is not related to water well construction, skip the remainder of this block Purpose of Well (check one): HomeIndustrialPublic SupplyIrrigationFish CultureOther: If a flowing well, method of flow regulation: ValveOther (describe)	Logs run (circle all applicable): No log ru Name of organization running log(s):	n Electric Gamma Ray Density Sonic Net	utron 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 take electric tape air line other: Well depth: Well grouted to a depth of /feet Type of grout (circle one) Neat Cement Bentonite Mix Casing length:feet Casing diameter: inches Type of casing: Screen length:feet Screen diameter: inches Type of screen: Screen slot size: feet Screen diameter: inches Type of screen: Type of completion (circle all applicable): Underreamed Telescoped Open hole Natural Development Other (describe): Top of lap pipe or reduction in casing: feet. <u>If telescoped or more than one screen, describe on next parts</u>	Seismic	SurveyOther (describe)	
Static Water Level: 502 feet above or below (circle one) land surface Date measured: 2-24.11///////////////////////////////////	Purpose of Well (check one): Home	ndustrial Public Supply Irrigation Fish	Culture Other:
Static Water Level: 502 feet above or below (circle one) land surface Date measured: 2-24.11///////////////////////////////////	If a flowing well, method of flow regulation	n: Valve Other (describe)	
Method of Measurement (circle one) steel tape electric tape air line other:			
Casing length:	Method of Measurement (circle one)		
Screen length:	Well depth: 148 Well grouted to a de		
Screen length:	Casing length: <u>13P</u> feet Casi	ng diameter: $\underline{\gamma''}_{inches}$ Type of ca	using: <u><i>fUC</i></u>
Type of completion (circle all applicable): cravel packed Underreamed Telescoped Open hole Natural Developme Other (describe):	Screen length:feet Screen	en diameter:inches Type of sc	reen: <u><u><u></u><u><u><u></u><u><u></u><u><u></u><u><u></u><u><u></u><u></u><u></u><u><u></u><u></u><u></u><u></u><u>r</u><u>r</u><u></u></u></u></u></u></u></u></u></u></u>
Other (describe):	Screen slot size:	Setting depth: Fromfeet to	feet
Top of lap pipe or reduction in casing:feet. If telescoped or more than one screen. describe on next pare	Type of completion (circle all applicable):	Gravel packed Underreamed Telescoped	Open hole Natural Developmen
		Other (describe):	
Form: OI WR-SWR-14			
	Top of lap pipe or reduction in casing:	feet. If telescoped or more than a	one screen, describe on next page

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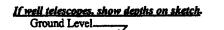
RECEIVED

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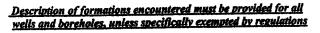
BY OIMR

1223

The sketch below only required for water wells

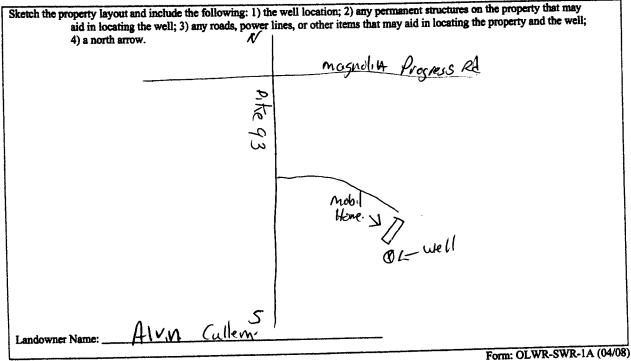


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Description of Formations Encountered	From (depth)	To (depth)
///	Ground Level	1
Clunt.	0	20
, cracky	20	60
white (and	60	80
Blue May	90	120
Sondil	120	140
(course sand	140	150
	-	

If more than one screen, show location of each on sketch



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 2-24-11. 029. Brad Vitzenald Date

Print Name of Responsible Licensee and License No.

Signature of Licensee

RECEIVED MAR 5 8 2011 RV- DIWR

County: Pike Para Pump Installer's Permit #:	CLL REPORT art 2 Completion Report t of Environmental Quality MWater Resources Box 2309 MS 39225 961-5210 1-5228 (fax)
This part of the report must be completed by a licensed water well or report must be attached and both parts filed with the Department a	t the above address within 30 days of well completion.
Well Owner Information	Well Location Latitude: 31° 4 53.6″ Longitude: 90° 23 4.8″
Owner Name: Alvy Cullen	
Mailing Address: Pite 93	Method of Lat/Long (check one): Conventional Survey,
	USGS quad, Hand-held GPS, Survey-grade GPS
City State Zip Code	<u>¼ Sec_3T_/N_R_8E</u>
•	Distance Direction Nearest Town
Telephone No. ()	Miles of
	Power Type
Pump Type Circle one	Circle one
Air Lift Jet Submersible	Diesei Engine Gasonie Engine
Bucket Piston Turbine	Electric Maton Minis
Centrifugal Rotary Flowing Well	Windmill Other (specify):
Other (specify):	Horse Power Rating of Motor:
Date Pump Installed: 2-24-11	Setting Depth:
Rated Pump Capacity:Gallons Per Minute	Number of Stages:
	Method of Measuring Water Level
Pump Test Data Date Well Tested:	Circle one Air Line Electric Measuring Line Steel Tape
Static Water Level (A):Feet Below Land Surface	
Pumping Water Level (B):Feet Below Land Surface	Other (specify):
Drawdown [(B) – (A)]:Feet Below Land Surface	For flowing well, measured shut in head:feet
	Well yielded GPM with a drawdown of
Test Pumping Rate: Gallons Per Minute Duration of Pump Test (minimum 4 hours): hours	
This is for (circle one): New Weth Replacement of E	xisting Pump Repair of Existing Pump
I HEREBY CERTIFY that the above statements are true to the best <u>Brad Filzerce</u> Office Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer Form: OLWR-SWR-1C (07-09)
	RECEIVE
	MAR 1 5 201

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