4	2	0
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Well or Borehole Location

Latitude: 3417 40.5 N Longitude: 8903 41.5 W

County: PONTOTOC
Permit #:
Driller: Praks + Parks
Date drilling completed: /2/3/18

Well Owner Information (Landowner if borehole is not for a water well)

STATE WELL REPORT Part 1

Driller's Log
Mississippi Department of Environmental Quality
Office of Land and Water Resources P.O. Box 2309

Jackson, MS 39225-2309 (601)961-5210 (601)360-0535 (fax)

For Office Use Only:	
Well #: B168	
Aquifer:	
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.

Method of Lat/Long (check one): Conventional Survey State Zip Code Gity State Zip Code Glistance) Well / Borehole Data Date drilling started: 125/12 Date drilling completed: 123/15/16 Date drilling started: 125/12 Date drilling completed: 123/15/16 Date drilling started: 125/12 Date drilling completed: 123/16/16 Hole diameter: 27/8 Location of the source of any surface water used for drilling: Letchod 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: Lournose of borehole (circle one) Water Well Geotechnical/Geological Investigation Ground 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 (circle all applicable): Home Industrial Public Supply Irrigation Fish Culture Other (describe): If a flowing well, method of flow regulation: Valve Other (describe) Static Water Level: See feet [above or below] land surface Date measured: 12/19/18 Method of measurement (circle one): Steel tape Electric tape Air line Other (describe): Well depth: 185 Well grouted to a depth of: 20 feet Type of grout (circle one) Bentonite Mix Casing length: 140 feet Casing diameter: 5 inches Type of casing: 140 feet Screen diameter: 4 inches Type of screen: 185 feet Type of completion (circle all applicable) Gravel packed Underreamed 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	Owner Name: Thase Rivers Planning + Doutlanews	17 LOS N Longitude: 2705 7105 W
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City State Zip Code Shall State	1 USCS mind	, Hand-held GPS, Survey-grade GPS
State Zip Code 3 Miles North of Portain	TONIOLOGI, MS DASES	_
relephone No. (Local) 296-2110 (Distance) (Direction) (Nearest Town) Well / Borehole Data Well / Borehole Data Date drilling started: 125/18 Date drilling completed: 125/18/Hole depth: 185 Hole diameter: 77/8 Docation of the source of any surface water used for drilling: Method of dosing and volume of Chlorine used in drilling and development: Dogs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: Dame of organization running log(s): Durpose of borehole (circle one: Water Well) Seismic Survey Other (describe) If drilling is not related to water well construction, skip the remainder of this block Purpose of Well (circle all applicable): Home Industrial Public Supply Irrigation Fish Culture Dother (describe): If a flowing well, method of flow regulation: Valve Other (describe) Static Water Level: Some feet [above or below] land surface Date measured: 12/19/18' Method of measurement (circle one): Steel tape (circle one) Well depth: 185 Well grouted to a depth of: 20 feet Type of grout (circle one) Neat Cement) Bentonite Mix Casing length: 140 feet Casing diameter: Inches Type of casing: Puccusing length: 140 feet Screen diameter: Inches Type of screen: Puccusing length: 140 feet Screen diameter: Inches Type of screen: Puccusing of completion (circle all applicable) Gravel packed Underreamed Open hole Natural Development Other (describe): Type of completion (circle all applicable) Gravel packed Underreamed 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		
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Other (describe):		
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If telescoped or more than one screen, describe on next page	Top of lap pipe or reduction in casing:feet	
Form: OLWR-SWR-1A (4/13	If telescoped or more than one screen, de	escribe on next page

The sketch below only required for water wells If well telescopes, show depths on sketch. Ground Level 30'Canani Cast 30'-10"Sustance Cast 30'-10"Sus

one screen, show location of each on sketch

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

Description of Formations Encountered		
Description of Formations Encountered	From (depth)	To (depth)
EU N.	Ground Level	
FILL DIAT	0	15.20
Black Clay	15,80	23
BIACK CLAY	23	62
SAWA + Kack	62	109
CAY + Limesiene	109	133
CLAY SAND + ROCK	132	1.45
SAND + ROCK	155	140
]	-
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Form: OLWR-SWR-IA (04/08)

Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee

STATE WELL REPORT

Part 2

County: PONTOTOC

Copy information from block on Part

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

Permit #:

Driller: _

Date completed:

Pump Installer's Completion Report

Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 2309 Jackson, MS 39225-2309

(601)961-5210 (601) 360-0535 (fax)

For C	Office Use Only:
Well #:	Blox
Aquifer:	

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 Owner Name: Thank River Almenny 1 Develop Latitude: 3417405N Longitude: 8903 41.5 W Method of Lat/Long (check one): Conventional Survey_ Mailing Address: 75 S. MAN S USGS quad_____, Hand-held GPS_____, Survey-grade GPS_ Miles (Distance) Telephone No. (661) 196-2110 Pump Type (circle one) Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe): Gallons Per Minute Rated Pump Capacity: ____ Date Pump Installed: _ Repaired Replacement New Is This Pump (circle one): Power Type (circle one) Natural Gas Tractor PTO Windmill Other (describe): ___ Electric Diesel Gasoline _feet Number of Stages: Setting Depth: Horse Power Rating of Motor: Pump Test Data for Non Flowing Well Duration of Pump Test (minimum 4 hours): 4 hours Date Well Tested: ___ Pumping Water Level (B): 125 Feet Below Land Surface Feet Below Land Surface Static Water Level (A): __ Test Pumping Rate: _____ Gallons Per Minute Feet Below Land Surface Drawdown [(B) - (A)]: __ Method of measurement (circle one): Steel tape (Electric tape) Air line Other (describe): Pump Test Data for Flowing Well Measured shut in head: 247,10 feet. hours of pumping feet after GPM with a drawdown of Well yielded Meter Installation Meter Serial Number: _____ Meter Manufacturer: _ Type of Meter:_____ Meter Model Number/Name: _ Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):_____ Meter installed by: _ Installation Date: _ Repaired Replacement Is This Meter (circle one): New Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards.

For agricultural wells, a list of approved meters is on the MDEQ website. I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

> Signature of Pump Installer Form: OLWR-SWR-1B (4/13)