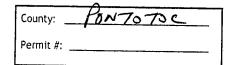
	WELL DEDODT	
County: TONTOTOC STATE	WELL REPORT Part 1	For Office Use Only:
r	Priller's Log	Well #: H-36
Mississippi Depart	ment of Environmental Quality	Aquifer:
7/20/13	and and Water Resources P.O. Box 2309	E-Log #:
	on, MS 39225-2309 (601)961-5210	
	1)360-0535 (fax)	
State Law requires that this report be prepared by the Department at the above address within 30 days of co		
Well Owner Information		hole Location
(Landowner if bo reh ole is not for a water well)	Latitude: <u>34 - 11 - 58</u> Lor	ngitude: <u>88-52-472</u>
Owner Name:	Method of Lat/Long (check one	e): Conventional Survey,
Mailing Address: 372 Leeper La		
	USGS quad,/Hand-held G	
Tontothe MS 38863		21 T 105 R 4E
City State Zip Code Telephone No. (62) 487-5487	$\frac{7}{1000}$ Miles $\frac{5}{1000}$	Fortote
Telephone No. (62) _ 487- 5481	(Distance) (Direction)	(Nearest Town)
Alal - Well/E	Borehole Data	1 ,11
Date drilling started: 1/9/13 Date drilling completed	: 7/29/13 Hole depth: 750	Hole diameter:
Location of the source of any surface water used for drilli	ng: Well wat	
Method of dosing and volume of Chlorine used in drilling a	and development:	pm
Logs run (circle all applicable): No log run Electric Gam	ma Ray Density Sonic Neutro	on Other:
Name of organization running log(s):		
Purpose of borehole (circle one): Water Welt Geotechn	ical/Geological Investigation	Ground Source Heat Pump
	(describe)	oround source near rump
If drilling is not related to water well of		af this black
	Public Supply Irrigation	Fish Culture
Other (<i>describe</i>):		
If a flowing well, method of flow regulation: Valve		
Static Water Level:feet [above of below (circle one)	v)land surface Date measure	d:
Method of measurement (circle one): Steel tape Electric	tape Air line Other (describe)	·
Well depth: 250 Well grouted to a depth of: 10	feet Type of grout (circle one)	: Neat Cement Bentonite Mix 🔰
Casing length: <u>60</u> feet Casing diameter:	. 1	
Screen length:feet Screen diameter:		·
Screen slot size: co/o inches Setting depth	: Fromfeet to	0 <u>750</u> feet
Type of completion (circle all applicable): Gravel packed	Underreamed Open hole	 Natural Development C.
Other (describe):		ił i
Top of lap pipe or reduction in casing:feet		Ano 81
· · · · · ·	one screen, describe on next pa	ige BY- Chi

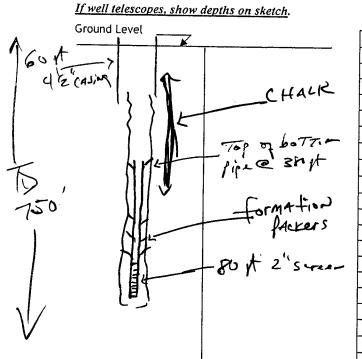
4

			× 3	_ N
Form:	OLWR-SV	WR-1A	(4/13)	



	For	Office Use Only:	-
Well	#:	H 36	

The sketch below only required for water wells

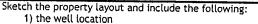


Description of formations encountered must be provided for a	ull wells	
and boreholes, unless specifically exempted by regulations	the month	

Description of Formations Encountered	From (depth)	To (depth)	
TOP CLAY	Ground level	15]
Top Jand	15	21-	
Blue Clay	25	40	1
CHALK	40	380	-
Silty Clay	380	1.50]_
SAND	650	7501	ELTAW
			C (AW)
			1 -
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	J		

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



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) north arrow

Well Shop
372 Leeper Lane
Landowner Name:
I HEREBY 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.

-		
/ STATE W	ELL REPORT	
County: TON TOTOL	Part 2	For Office Use Only:
	er's Completion Report	
	ment of Environmental Quality and and Water Resources	Well #: 11-36
Date completed: 7/30//3	P.O. Box 2309	Aquifer:
	on, MS 39225-2309 (601)961-5210	Admen:
(60)	1) 360-0535 (fax)	
This part of the report must be completed by a licensed wate of the report must be attached and both parts filed with the	Department at the above address w	vithin 30 days of well completion.
Well Owner Information	• Well L Latitude: <u>34 /2.003</u> Lon	ocation
Owner Name: KAY Leeper >R	Latitude: $27 / \sqrt{.03}$ Lon	gitude: 22 . 6 /3
Mailing Address: 372 Zeeper LN	Method of Lat/Long (check one	
		PS, Survey-grade GPS
City / State Zip Code	¼¼, Sec	21 T 10 S R4E
Telephone No. (462) 489-5481	Miles SE of	(Nearest Town)
Telephone No. ((Distance) (Direction)	(Nearest Town)
	pe (circle one)	
Submersible) Turbine Air Lift Centrifugal Flowing Well		
Date Pump Installed: 7/30/13	Rated Pump Capacity:/ 0	Gallons Per Minute
Is This Pump (circle one): New Repaired Replaceme		
	ype (circle one)	
Electric Diesel Gasoline Natural Gas Tractor PTO Wi		
Horse Power Rating of Motor: Setting Dep	th: <u>210</u> feet Number	of Stages:
Pump Test Data	for Non Flowing Well	
Date Well Tested: 30 - (3	Duration of Pump Test (minim	um 4 hours): hours
Static Water Level (A): Feet Below Land Surface		
Drawdown [(B) - (A)]:Feet Below Land Sur		
Method of measurement (circle one): Steel tape Electric t		
	ata for Flowing Well	
Measured shut in head:feet.	-	
Well yielded GPM with a drawdown of	feet after	hours of pumping
	Installation	
Meter Manufacturer:		
Meter Model Number/Name:		
Totalizer Register Unit and Multiplier Factor (AF x .001, ga		
Installation Date: Meter installed by:		
Is This Meter (circle one): New Repaired Replacem		
Important: By submitting the above information you are o For agricultural wells, a list of a	certifying that this meter was insta pproved meters is on the MDEQ w	lled to manufacturer standards. ebsite.
I HEREBY CERTIFY that the above statements are true to t	he best of my knowledge.	
Leeper Drilling # 0079	7.30-13	Teese Mil X 2 24 13
Print Name of Pump Installer and License No. (if applicable		ture of Pump Installer
The number of rump installer and License No. (i) applicable	e, vale olym	Form: OLVR-SWR-1B (4)/36