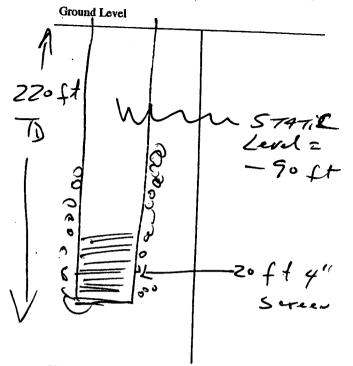
$\mathcal{L}_{-}$	State v	Well Report	F	
County: Treatiss	Dort 1		For Office Use Only:	
Permit #:	Mississippi Departm	ant of Part	i on the ose only:	
1 cinut #:	Office of I am	ent of Environmental Quality	Aquifer:	
Driller: Leave Dallies	The of Land and Water Resources		( 20	
	P.O.	Box 10631	Well #: <u>6-77</u>	
Date drilling completed:7	Jackson,	MS 39289-0631		
	(60)	1)961-5210	L. S. Elevation:	
	(601)3	54-6938 (fax)	***	
State Law requires that the		()	E-log #:	
30 days of completion of Law	ort be prepared by th	e driller in detail and such		
State Law requires that this repo	of the well.	m detail and fried W	th the Department within	
, Onder impring	IIAN			
Owner Name Allen Frenzell Latitude: .		•	Location	
Mailing Address: /24 CR 3, 3   Latitude: "Longitude: "Longitude: "			P. Lamete de la	
Mailing Address: 124 CR	3/2/			
	<u> </u>	Method of Lat/Long (circle one	)), Carry 11 - 1 - 1	
·		and sometic office	conventional Survey,	
2 11		USGS quad, Hand-held (	and o	
DOONEVILLE MS	38/29	1 , zzana-neja (	oro, Survey-grade GPS	
Booneville MS City State	7: 0 :	¼ ¼ Sec 29	Twn 55 Rng 8E	
//-	Zip Code			
Telephone No. (662, 728-4.	146	Distance Direction Miles	None - T	
		MilesF	f And EV.	
			1200-11/12	
Purmana	Well I	Data		
Purpose of Well (circle one) Home Indus	Strial Public Co		•	
Date well 4 tur	r dolle auppty	Irrigation Fish Culture (	Other:	
Date well drilling started: Y-14-  If flowing, method of flow regulation: Valve	D-4-	10 4 44		
If flowing	Date v	vell drilling completed:	- o 7 .	
,	(146/3	· ·		
If flowing, method of flow regulation: Valve Static Water Level:feet abov Method of Measurement (circle one)	Other (de	escribe)		
feet abov	e or helow direis	• -		
Method as a s	r colon (chele one) la	and surface Date measured:	F-17-07	
(Short Olic) Size	ISDA -1			
Method of Measurement (circle one) steel  Hole depth: 2204 Well depth:  Type of grout (circle one): Cement	electric tabe	air line other:		
Well depth:	= 220 1/r	377		
Type of grout (circle		well grouted to a depth of/	U feet	
Type of grout (circle one): Cement	Bentonite (Mix)		.001	
Casing length: 200				
feet Casing diameter:				
Casing length: 200 feet Casing diameter: 4" inches Type of casing: 100 feet Screen diameter: 4"				
1CCI NCTARD diament				
Screen slot size.				
octung depth: From 200 feet to 220				
Type of completion (circle all applicable)				
		Open note	Natural Development	
U	ther (describe):		ł	
Top of lap pipe or reduction in casing:  Logs run (circle all applicable): No log run E	_			
- Cabing,	fcet. If teles	coped or more than one screen		
Logs run (circle all applicable): No log run	المساد المسادا	one bereen,	nescribe on back of page	
, 1.0P.10H I	decuric Gamma Ray [	Density Sonic Neutron Other	<u>.</u> .	
Name of organization running log(s):		- Table Office		
I certify that the well was drilled, constructed	l and a second		j	
I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi  Department of Environmental Quality and/or the Mississippi Department of Harly				
Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.				
The about the regulations and state laws.				
Leeper 1 : 11-10079				
Print Name of Water Well Contractor and Licen	se No			
		Signature of Water	r Well Convactor	
			- Junior	

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Description of Formations Encountered	From	То
/ P CIAV	U	20
Blue Clay	20	60
Blue Clay Silty Green	60	EU
Blue Clay	80	100
Silty Green	_	<u> </u>
Clay	100	180
E4 TAN SAND	150	22.
	100	
	1	
	1	
	<del>  </del>	
	<b>  </b>	
	1	
	<del>                                     </del>	
	├	

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

Sketch the property layout and include the following: 1) the well location aid in locating the well; 3) any roads, power lines, or other 4) indicate direction.	; 2) any permanent structures on the property that may tems that may aid in locating the property and the well;
	Brive
	Hons -
andowner Name: Aller Freque	

Signature of Water Well Contractor

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## STATE WELL REPORT

County: Permit #: Driller: Date completed:

## Part 2 Pump Installer's Completion Report Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 10631

Jackson, MS 39289-0631 (601)961-5210 (601)354-6938 (fax)

For Office Use Only:	
Aquifer:	
Well #: 6-77	)
Elevation:	

this report should be prepared by the pump installer in installation of pump.	dotall
Well Owner and Market In	detail and filed with the Department within 30 days of the
Well Owner Information	
Owner Name: Alked Frenzell	Well Location
Mailing Address: 124 CR 3/2/	Latitude:Longitude:
	Method of Lat/Long (circle one): Conventional Survey,
Booneville MS 38829 City State Zip Code	USGS quad, Hand-held GPS, Survey-grade GPS
Telephone No. (662) 728-4144	Distance Direction Nearest Town  4 Miles EAS Tof Booneville
Pump Type	
Circle one	Power Type Circle one
Bucket Submersible	Diesel Engine Gasoline Engine Natural Gas
Centrifugal	Electric Motor Hand Tractor PTO
Other (specify):	Windmill Other (specify):
Date Pump Installed:	Horse Power Rating of Motor:
Rated Pump Capacity:	Setting Depth:feet Number of Stages:/
Pump Test Data	
rump Test Data	Mathod 534
Date Well Tested:	Method of Measuring Water Level Circle one
Static Water Level (A):Peet Below Land Surface	Air Line Electric Measuring Line Steel Tape
Pumping Water Level (B): 90 Feet Below Land Surface	Other (specify):
Drawdown [(B) - (A)]:Feet Below Land Surface	For flowing well, measured shut in head:feet
Test Pumping Rate:Gallons Per Minute	1 TTP 10 0 -
Duration of Pump Test (minimum 4 hours):hours	Well yieldedGPM with a drawdown offeet afterhours of pumping
I HEREBY CERTIFY that the above statements are true to the best of the position of the position of Pump Installer and License No. (if applicable)	my knowledge
· · · · · · · · · · · · · · · · · · ·	Signature of Pump Installer

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