		State W	/ell Report	For Office Use Only:
County: Quitma	n		Driller's Log	Aquifer:
Permit #: GW-45			t of Environmental Quality	well #: F46
Driller: Irrigatio			and Water Resources Box 2309	L.S. Elevation:
Date drilling completed			, MS 39225	E-log #:
Date of thing completed		(601)	961-5210	
		(601) 96	1-5228 (fax)	
				le for the work and filed with the
	<i>department at the a</i> Information on V		s of completion of drilling of th Well or 1	e well or borehole. Borehole Location
(Lando		not for a water well)		
Owner Name	Jerry Locke		Latitude: <u>34</u> ° <u>16</u> ' <u>4</u>	<u>3</u> " Longitude: <u>90</u> ° <u>09</u> '
Mailing Address:	351 Bill Locke Ro	oad	Method of Lat/Long (check one	): Conventional Survey,
			🗌 USGS quad, 🛛 Ha	and-held GPS, 🔲 Survey-grade (
	Marks	<u>Ms 38646</u>	IR 1/4 IR 1/4 Sec	23 / Twn 28N Rng 1E
	City	State Zip code	Distance Direction	n Nearest Town
Telephone No.	() -		<u>6</u> Miles Northea	ist of Marks
		1117 pr / 11	Jorehole Data	
			orenoie Data	
Location of the so	urce of any surface wa	Date drilling completed: <u>04</u> ater used for drilling: <u>Surfac</u>	e Water	0 Hole diameter: 24"
Location of the so Method of dosing Logs run (check al	urce of any surface wa and volume of Chlori Il applicable): 🛛 No	ater used for drilling: <u>Surfac</u> ne used in drilling and develope log run Electric Gamm	e Water nent: 50 PPM na Ray Density Sonic D	0 Hole diameter: 24" Neutron □ Other:
Location of the so Method of dosing Logs run (check al Name of organizat	urce of any surface wa and volume of Chlori	ater used for drilling: Surfac ne used in drilling and develope log run Electric Gamm	e Water nent: 50 PPM	Neutron  Other:
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The sketch below only required for water wells

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)	
Clay	Ground level	15
Fine Sand	16	45
Course Sand & Gravel	46	85
Medium Sand	86	95
Course Sand	96	120
		<b> </b>
· · · · · · · · · · · · · · · · · · ·		

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

Sketch the property layout and include the follo aid in locating the well; 3) any r 4) a north arrow.	owing: 1) the well location roads, power lines, or othe	n; 2) any permanent structures on the property that may r items that may aid in locating the property and the well;
		RECEIVED
		MAY 0 9 2012
		BY: OLWR
Landowner Name: Jerry Locke		
I certify that the well/borehole was drilled, construct Mississippi Department of Environmental Quality a laws.	cted, and completed in acco and the Mississippi Departi	Form: OLWR-SWR-1A (04/08) rdance with all applicable requirements of the ment of Health regulations, if applicable, and state
Patrick Chism 0695 Print Name of Responsible Licensee and License No.	05/04/2012 Date	Signature of Licensee

	STATE W	ELL REPORT	
County: <u>Qu. 4man</u> Permit #: <u>GW- 45904</u> Driller: <u><b>TPE_ECASTED</b></u> <u>EQUE</u> <u>Aman</u> Date completed: <u><u>4-19-12</u> <u>Copy information from block on Part 1</u> This part of the report must be completed report must be attached and both parts file Well Owner Informat</u>	Pump Installe Mississippi Departm Office of Land P.C Jacks (60 (601) by a licensed water well ad with the Department	Part 2 r's Completion Report ent of Environmental Quality d and Water Resources D. Box 2309 on, MS 39225 1)961-5210 961-5228 (fax) I contractor or a licensed pump of at the above address within 30 a	For Office Use Only: Aquifer: FAG Well #: Elevation: installer. A copy of Part 1 of the lays of well completion. Il Location
Owner Name: <u>BILBO FARM</u>			Longitude: 90 • 91 31 11
Mailing Address: <u>357</u> <u>BLCC</u> <u><u>MA2ES</u> <u>MS</u> City State Telephone No. (<u>[ele2</u>] <u>32Le-Z/S</u></u>	<b>BRLA</b> Zip Code	USGS quad, Hand-held <u>らい、くい、</u> ない、Sec <u>2</u> Distance Direction	ne): Conventional Survey, GPS, Survey-grade GPS <u>3</u> T <u>28 N</u> R <u>1 E</u> Nearest Town f <u>MAZES</u>
Pump Type Circle one			wer Type
			ircle one
	Submersible c	Diesel Engine Gasolin	e Engine Natural Gas
Bucket Piston	Turbine	Electric Motor Hand	Tractor PTO
Centrifugal Rotary	Flowing Well	Windmill Other (	specify):
Other (specify):	· · · · · · · · · · · · · · · · · · ·	Horse Power Rating of Motor:	60
Date Pump Installed: 5 - 4-12		Setting Depth:70	
Rated Pump Capacity: 2200		Number of Stages:	
Pump Test Data		Method of Mos	muning Woten Laure
Date Well Tested:		Cin	isuring Water Level rcle one
		Air Line Electric Meas	uring Line Steel Tape
Static Water Level (A):Feet B		Other (specify):	
Pumping Water Level (B):Feet Be			
Drawdown [(B) - (A)]:Feet B	elow Land Surface	For flowing well, measured shu	it in head:feet
est Pumping Rate:Gallons Per Minute		Well yielded	_GPM with a drawdown of
Duration of Pump Test (minimum 4 hours):	hours		hours of pumping
HEREBY CERTIFY that the above statement DAUL P. HOLT Print Name of Pump Installer and License No.	0-752P	my knowledge. Signature of Pump Inst	Aller Form: OLWR-SWR-1B (04/08) JUN () 1 2012 BY: OLW

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