GW42126	State Well Report	For Office Use Only:			
County: Quitman	Part 1 – Driller's Log				
	Mississippi Department of Environme	ntal Quality Aquifer:			
Permit #:	Office of Land and Water Reso P.O. Box 10631	well #:			
Driller: Will Young	Jackson, MS 39289-0631	L. S. Elevation:			
Date drilling completed: 7/22/07	(601)961-5210				
	(601)354-6938 (fax)	E-log #:			
State Law requires that this repor	t be prepared by the license holder res within 30 days of completion of drilli	ponsible for the work and filed with the ng of the well or borehole.			
Information on Well (	)wner	Well or Borehole Location			
(Landowner if borehole is not fo		· 10, 36" Longitude: 90 ° 11, 92"			
Owner Name Larry McAl	exander	/Long (circle one): Conventional Survey,			
Owner Ivanie	Method of Lat	/Long (circle one): Conventional Survey,			
Mailing Address: P.O. Box	USGS q	uad, Hand-held GPS, Survey-grade GPS			
Oxford, ms		5% Sec 1 Twn 95 Rn 10W			
City Sta	te Zip Code Distance	Direction Nearest Town es <u>NE</u> of Marks, MS			
Telephone No. (662) 816 - 2	308	01 1100			
	Well / Borehole Data				
Date drilling started;   3267 Date d	rilling completed: 122107 Hole dept	h:			
Location of the source of any surface water used for drilling:  Method 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:  Name of organization running log(s):					
	WellGeotechnical/Geological Investiga	ation Ground Source Heat Pump			
G : ' G 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 Other:					
If a flowing well, method of flow regulat	If a flowing well, method of flow regulation: Valve Other (describe)				
Static Water Level: 20 feet	Static Water Level:feet above or relow (circle one) land surface Date measured:/ 23/67				
Method of Measurement (circle one) teel tape electric tape air line other:					
Well depth: 100 Well grouted to a depth of A11 feet Type of grout (circle one): Neat Cement Bentonite Mix					
Casing length: 11070 feet Ca	Casing length: 100 70 feet Casing diameter: 12 inches Type of casing: PUC  Screen length: 40 feet Screen diameter: 12 inches Type of screen: PUC				
Screen length: 40 feet Sc	reen diameter: 12 inches	Type of screen:			
Screen slot size:					
Type of completion (circle all applicable		lescopea Open поте масшат Белегоричени			
	Other (describe):				

Top of lap pipe or reduction in casing: \_

Form: OLWR-SWR-1A

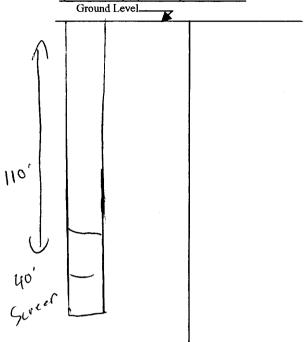
feet. If telescoped or more than one screen, describe on next page

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### The sketch below only required for water wells

If well telescopes, show depths on sketch.



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

Description of Formations Encountered	From (depth)	To (depth)
	Ground Level	
Gembo/Clay	0	30
Fine Sand	31	41
Coarse Sand	42	47
Caanse Sand + Gravel	48	108
Gumbo/Clay	109	110
		l

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

Sketch the property layout and include the following: 1) the well location; 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) a north arrow.			
East > Marus, ms 1tmy 6			
marks, m> 1-twy 6	ash Log Rd		
Landowner Name:	Form: OI WD SWD 1		

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

Jumper

Print Name of Responsible Licensee and License No.

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BY OLWA

## STATE WELL REPORT

# Permit #: 0368 Driller: Will Young Date completed: 74 2207

# 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

For Office Use Only:			
Aquifer:			
Well #: C-83	_		
Elevation:	_		

(601)354-6938 (fax) Copy information from block on Part 1 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 Latitude: 34° 20, 30 Longitude: 90° Owner Name: Larry Mc Alexander P.O. Box 1041 Method of Lat/Long (check one): Conventional Survey\_\_\_\_\_ Mailing Address:\_ USGS quad\_\_\_\_, Hand-held GPS\_\_\_, Survey-grade GPS\_\_\_ 1/4 \_\_\_\_\_ 1/4 Sec\_\_\_\_ T\_\_\_\_ R\_\_ City State Zip Code Direction Nearest Town Distance Miles NE of Marks, MS Telephone No. (662) 816 - 2308 **Power Type** Pump Type Circle one Circle one Diesel Engine Gasoline Engine Natural Gas Submersible Jet Air Lift Tractor PTO Electric Motor Hand Piston Bucket Windmill Other (specify): \_\_\_ Flowing Well Centrifugal Rotary 60 Horse Power Rating of Motor: \_\_\_\_ Other (specify): \_\_ Date Pump Installed: 70/23/07 Setting Depth: \_\_\_ Rated Pump Capacity: 25 CO Gallons Per Minute Number of Stages: Method of Measuring Water Level Pump Test Data Circle one Date Well Tested: 7 • 12 3 /67 Air Line Electric Measuring Line Static Water Level (A): \_\_\_\_\_\_Feet Below Land Surface Other (specify): Pumping Water Level (B): 45 Feet Below Land Surface Drawdown [(B) - (A)]: \_\_\_\_\_\_\_\_\_Feet Below Land Surface For flowing well, measured shut in head: \_\_\_\_ Well yielded \_\_\_\_\_GPM with a drawdown of Test Pumping Rate: 2300 Gallons Per Minute feet after \_\_\_\_\_hours of pumping Duration of Pump Test (minimum 4 hours): \_\_\_

I HEREBY CERTIFY that the above statements are true to the best o	of my knowledge.	
Joel Jumper OSLB	tall funger	
Print Name of Pump Installer and License No. (if applicable)	Signature of Purpo Installer Form: OLDERS VRIDE	VED

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