CAS SMITH #4
EAST CAMETA RD.

GW45819 State W	Vell Report			
County: Shackey Part 1 - 1	Driller's Log	For Office Use Only:		
Mississippi Departme	nt of Environmental Quality and Water Resources	Aquifer: $+ 2/4$		
	Box 2309	Well #:		
Jackson	n, MS 39225	L. S. Elevation:		
	961- 5210 1- 5228 (fax)			
State I am requires that this report he prepared by the li-	ana haldan masmanaible Com	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.				
Information on Well Owner		orehole Location		
(Landowner if borehole is not for a water well)	Latitude: 33 . 00, 41	" Longitude: 90 . 48 . 45 "		
Owner Name Cand S Smith Farms Inc.				
Mailing Address: P. O. Box 534	Method of Lat/Long (circle or			
	USGS quad Hand-held	GPS Survey-grade GPS Twn /4// Rng 06 W		
1 1 11 20221	145W 14 Sec 34	Twn 14/N Rng 06W		
Anguilla M5 38721 City State Zip Code	Distance Direction	Nearest Town		
	Distance Direction 4.5 Miles N.E.	of ANGUILLA		
Telephone No. ()				
Well / Bore				
Date drilling started: 4.28.12 Date drilling completed: 4.28.12 Hole depth: 10 Hole diameter: 24"				
Location of the source of any surface water used for drilling: DITCH Method of dosing and volume of Chlorine used in drilling and development: CHLORINE TABLETS				
Logs run (circle all applicable): Yo log run Electric Gamma Ray Name of organization running log(s):	Density Sonic Neutron	Other:		
Purpose of borehole (check one): Water Well Geotechnical/Geol	ogical 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 (check one): Home Industrial Public Supply Irrigation Fish Culture Other:				
If a flowing well, method of flow regulation: Valve Other (describe)				
Static Water Level:feet above or below (circle one)	land surface Date measured:			
Method of Measurement (circle one) steel tape electric tape air line other:				
Well depth: Well grouted to a depth of 10 feet Type	of grout (circle one): Neat Cem	ent Bentonite Mix		
Casing length: feet Casing diameter:	inches Type of casing:	P.V.C.		
Screen length: 40 feet Screen diameter: 16 inches Type of screen: P.J.C.				
Screen slot size:	feet to \\(\)	<u>feet</u>		
Type of completion (circle all applicable): Oravel packed Underreamed Telescoped 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

Form: OLWR-SWR-1A (04/08)

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JUN 18 2012

BA OLWA

The sketch below only required for water wells

Print Name of Responsible Licensee and License No.

Ground Level	Description of Formations Encountered		
! ▲	TOP SOIL	From (depth)	To (dep
\\\\	CLAY	Ground Level	10
	FINE SAND	25	145
	MED. SAW	1 40	140
11-70	COACSE SAND ASBUT	90	9
	Bottom	100	110
10th 16'casne		,10-	1.,,
1100000			
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			†
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- 			
1 10			
114(), =			
11 10 4			
16" screen			
1 O specie			L
- V -			
SEE MA	₽ -		
ndowner Name:			
IIIIIIIII IAMIII			
rtify that the well/borehole was drilled, constructed, and com		m: OLWR-SWR-1A	•

Date

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

Signature of Licensee

A214

STATE W	ELL REPORT		
	Part 2	For Office Use Only:	
Pump Installer	Pump Installer's Completion Report Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 2309 Jackson, MS 39225 (601)961-5210		
Driller The McOnne 0-773 Office of Land			
Copy information from block on Part 1 (601)9	61-5228 (fax)		
This part of the report must be completed by a licensed water well report must be attached and both parts filed with the Department	at the above address within 30 d	ays of well completion.	
Well Owner Information	Wel	ll Location	
Owner Name: Cand J Smith Farms Inc.	arms. Inc. Latitude: 33.00,41"		
Mailing Address: P.O. BOX 534		Method of Lat/Long (check one): Conventional Survey,	
Δ		GPS, Survey-grade GPS	
Anguilla MS 38721 City State Zip Code	SW 1/4 SW 1/4 Sec_	34 T14N ROGW	
Telephone No. ()	Distance Direction 4.5 Miles N.E. o	f Anguilla	
Pump Type Circle one		wer Type Circle one	
Air Lift Jet Submersible		ne Engine Natural Gas	
Bucket Piston Turbine	Electric Motor Hand	Tractor PTO	
Centrifugal Rotary Flowing Well		(specify):	
Other (specify):	•	:	
Date Pump Installed: 4/29/12	Setting Depth:	feet	
Rated Pump Capacity: QOOO Gallons Per Minute	Number of Stages:	<u> </u>	
Pump Test Data	Method of Me	easuring Water Level	
Date Well Tested:		ircle one suring Line Steel Tape	
Static Water Level (A):Feet Below Land Surface			
Pumping Water Level (B):Feet Below Land Surface	Other (specify):		
Drawdown [(B) - (A)]:Feet Below Land Surface	For flowing well, measured sh	nut in head:feet	
Test Pumping Rate:Gallons Per Minute	Well yielded	GPM with a drawdown of	
Duration of Pump Test (minimum 4 hours):hours	feet after	hours of pumping	
		RECE	
This is for (circle one): New Well Replacement of Ex	cisting Pump Repair of Ex	RECE xisting Pump . JUN 18	
I UEDEDV CEDTIEV that the shave statements are true to the heat	of my Imagelada	RV.	

Signature of Pump Installer

Form: OLWR-SWR-1C (07-09)

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

