

State Well Report

Part 1 - Driller's Log

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225
(601)961- 5210
(601)961- 5228 (fax)

County: SHARKEY
 Permit #: GW-45714
 Driller: J. NEWCOME 0.773
 Date drilling completed: 3.19.13

For Office Use Only:
 Aquifer: _____
 Well #: B140
 L. S. Elevation: _____
 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 (Landowner if borehole is not for a water well)	Well or Borehole Location
Owner Name: <u>JAMES BOYKIN</u>	Latitude: <u>33.04.18</u> Longitude: <u>90.45.09</u>
Mailing Address: <u>573 CHESTERVILLE ROAD</u>	Method of Lat/Long (circle one): Conventional Survey, <u>CG</u>
<u>APARTMENT 2</u>	USGS quad: <u>Hand-held GPS</u> , Survey-grade GPS
<u>TUPELO</u> MS <u>38801</u>	<u>NE</u> 1/4 SW 1/4 Sec <u>07</u> Twn <u>14N</u> Rng <u>05W</u>
City State Zip Code	Distance Direction Nearest Town
Telephone No. () _____	<u>3.5</u> Miles <u>EAST</u> of <u>DELTA CITY</u>

Well / Borehole Data

Date drilling started: 3.19.13 Date drilling completed: 3.19.13 Hole depth: 120 Hole diameter: 20"

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): No log run Electric Gamma Ray Density Sonic Neutron Other: _____

Name of organization running log(s): _____

Purpose of borehole (check one): Water Well Geotechnical/Geological 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: 118 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 78 feet Casing diameter: 10 inches Type of casing: P.V.C.

Screen length: 70 feet Screen diameter: 10 inches Type of screen: P.V.C.

Screen slot size: .050 inches Setting depth: From 78 feet to 118 feet

Type of completion (circle all applicable): Gravel 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*

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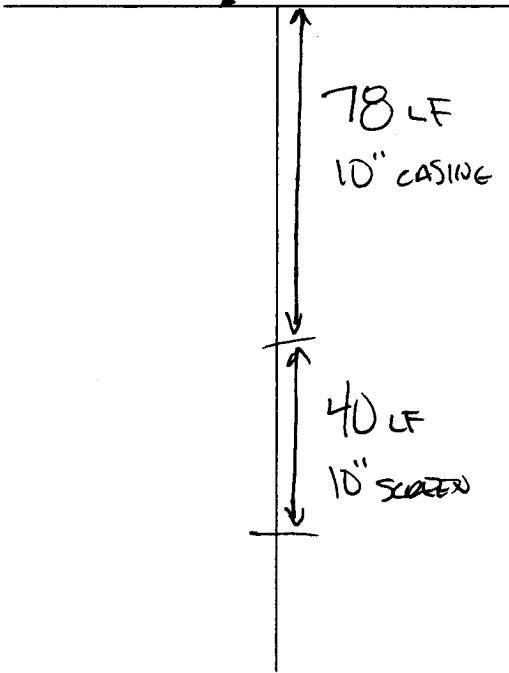
BY: OLWR

B140

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)	To (depth)
TOP SOIL	Ground Level	10
CLAY	10	25
MIX	25	40
FINE SAND	40	55
MEDIUM/ COARSE	55	70
COARSE/ PEBBLES	70	118
BOTTOM	118	120
	120	120

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.

SEE MAP

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Landowner Name: _____

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

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 laws.

JOHN NEWCOMB 0-773 3.9.13

John Newcomb

Print Name of Responsible Licensee and License No. Date Signature of Licensee