	4 • 4	n State W	ell Report							
	county: Sharkey	Part 1 – 1	Driller's Log	For Office Use Only:						
4	Permit #: GW 44782	Mississippi Departmen	nt of Environmental Quality nd Water Resources	Aquifer. <u>245</u>						
870.	Irrigation Equipment	P.O.	Box 2309	Well #:						
38.		Jackson	n, MS 39225	L. S. Elevation:						
MS	Date drilling completed: 7-18-11	(601)96	961- 5210 1- 5228 (fax)							
	State Law requires that this repo		anse holden normansible for	E-log #:						
_le	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.									
Ţ.	Information on Well Owner (Landowner if borehole is not for a water well)		Well or Bo	rehole Location						
ll eenvill	Charon V Stic		Latitude: 32 . 57 .28.0	² Longitude: <u>90 ° 45 ', 32 . 9</u> ,						
E	Owher Name									
Gra	Mailing Address: 1977 Widow	Bayou Rd	Method of Lat/Long (circle on	e): Conventional Survey,						
sti				GPS, Survey-grade GPS						
р 60	Anguilla	MS 38721	NU1/ SW 1/ Sec 19							
44 44		ate Zip Code	Distance Direction	Nearest Town						
Russ Box	Telephone No. ()		3 Miles SE	Nearest Town of <u>Anguille</u>						
щщ				•						
	Well / Borehole Data									
	Date drilling started: 7-18-11 Date d	rilling completed: 7-18	<u> 1</u> Hole depth: <u>1スス</u>	Hole diameter: 24"						
	Location of the source of any surface wa	ter used for drilling S	Surface Water							
	Method of dosing and volume of Chlorine used in drilling and development: 50 PPM									
	Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:									
	Purpose of borehole (check one): Water Well <u>Geotechnical/Geological Investigation</u> Ground Source Heat Pump <u>Seismic Survey</u> Other (<i>describe</i>) <u>If drilling is not related to water well construction, skip the remainder of this block</u>									
	Purpose of Well (check one): Home		-							
	If a flowing well, method of flow regulati			2.10.11						
		bove of below circle one) l	and surface Date measured:	2-19-11						
		teel tape electric tape								
	Well depth: <u>122</u> Well grouted to a de	epth of <u>10</u> feet Type	of grout (circle one): Neat Ceme	ent Bentonite Mix						
	Casing length: 82 feet Casing diameter: 16 inches Type of casing: PVC Screen length: 40 feet Screen diameter: 16 inches Type of screen: PVC Screen slot size: .050 inches Setting depth: From 83 feet to 122 feet Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development									
Í										
		Other (describe):								
	Top of lap pipe or reduction in casing:	feet. <u>If tel</u>	escoped or more than one screen	n, describe on next page						

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The sketch below only required for water wells

If well telescopes, show de Ground Level	epths on sketch.
	<i>4</i>

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

N45

Description of Formations Encountered	From (depth)	To (denth)
Clay	Ground Level	38
Fine Sand	39	49
Fine Sand + Gravel	50	75
Fine Sand + Gravel Medium Sand + Gravel	76	122
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	1	

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.

Bill Stigall GW 44782 Landowner Name:

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.

Date

Patrick M. Chism 0695

Print Name of Responsible Licensee and License No.

Signature of Licensee

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

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Permit #:GW Irrigat: Duiller: Date completed: Corr Information This part of the report must be Owner Name: Mailing Address	a from block on Part 1 e report must be completed attached and both parts fi Well Owner Informa Sharon K Sti 1977 Widow Anguilla M	Pump Installer Mississippi Departme Office of Land P.O Jackso (601)9 by a licensed water well led with the Department tion gall	at the above address within 30 c	Aquifer: Well #: D 4 5 Elevation: installer. A copy of Part 1 of the days of well completion. Il Location Longitude:
Date completed: <u>Cour</u> information This part of the report must be Owner Name: Mailing Addres	<u>7-18-11</u> <u>A from block on Pert 1</u> <u>attached and both parts fi</u> <u>Well Owner Informa</u> Sharon K Sti <u>1977 Widow</u> Anguilla M	P.O Jackso (601)9 I by a licensed water well led with the Department tion gall	. Box 2309 m, MS 39225 1)961-5210 61-5228 (fax) I contractor or a licensed pump at the above address within 30 o We Latitude:	Elevation:
<u>Corr information</u> This part of the <u>report must be</u> Owner Name: Mailing Address	a from block on Part 1 e report must be completed attached and both parts fi Well Owner Informa Sharon K Sti 1977 Widow Anguilla M	(601) (601)9 I by a licensed water well led with the Department tion gall	1)961-5210 61-5228 (fax) I contractor or a licensed pump at the above address within 30 o We Latitude:	installer. A copy of Part 1 of the days of well completion. Il Location
This part of the report must be Owner Name: Mailing Addres	report must be completed attached and both parts fi Well Owner Informa Sharon K Sti 1977 Widow Anguilla M	」 I by a licensed water well led with the Department tion gall	l contractor or a licensed pump at the above address within 30 o We Latitude:	days of well completion. Il Location
Owner Name: Mailing Address	Well Owner Informa Sharon K Sti . 1977 Widow Anguilla M	ttion gall	at the above address within 30 o We Latitude:	days of well completion. Il Location
Mailing Addres	Sharon K Sti <u>1977 Widow</u> Anguilla M	gall	Latitude:	
Mailing Addres	Anguilla M	Bayou Rd		_Longitude:
	Anguilla M			
Telephone No.			and the second	•
Telephone No.	i	IS '		1 GPSSurvey-grade GPS
Telephone No.	City State	Zip Code	¼¼ Sec_	$\frac{19}{10} T \frac{13N}{R} R \frac{5W}{10}$
)		Distance Direction Miles	of <u>Anguilla</u>
· · · · · · · · · · · · · · · · · · ·				
	Pump Type Circle one			ower Type Circle one
Air Lift	Jet	Submersible	Diesel Engine Gasoli	ine Engine Natural Gas
Bucket	Piston	Turbine	Electric Motor Hand	Tractor PTO
Centrifugal	Rotary	Flowing Well	Windmill Other	(specify):
Other (specify)			Horse Power Rating of Moto	n: <u>60</u>
Date Pump Inst		!/	Setting Depth:	70feet
Rated Pump Ca	pacity: 2500 ±	_Gallons Per Minute	Number of Stages:	
	Pump Test Data	······································	Method of M	casuring Water Level
1	:d:			Circle one casuring Line Steel Tape
Static Water Le	vel (A):Fee	t Below Land Surface	Other (specify):	
Pumping Water	Level (B):Fcc	t Below Land Surface		
Drawdown [(B)	-(A)]:Fee	t Below Land Surface	For flowing well, measured s	shut in head:feet
Test Pumping I	Late:	Gallons Per Minute	Well yielded	GPM with a drawdown of
Duration of Pu	np Test (minimum 4 hours):hours	feet after	hours of pumping
				
This is for	(circle one): New Wel	1 Replacement of E	xisting Pump Repair of I	Existing Pump
			TIM	
1	RTIFY that the above state k M. Chism 0	•	of my knowlige.	
	ump Installer and License		Signature of Pump I	Installer Form: OLWR-SWR-16-07

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