1 10	State Well I	ceport	E OCC VI O I	
County: GMITh	Part 1 – Driller's Log		For Office Use Only:	
County.	Mississippi Department of Environmental Quality		Aquifer:	
Permit #:	Office of Land and Water Resources		Well #: 1 - 44	
Driller: Of ice of geods (P.O. Box 10631		Well #:	
Driller. Do 100 D 1 300 J	Jackson, MS 39289-0631		L. S. Elevation:	
Date drilling completed: 11606	(601)961-5210		-	
(-/	(601)354-693	3 (fax)	E-log#: NO044	
State Law requires that this repor Department at the above address Information on Well C	within 30 days of completion	of drilling of the well		
(Landowner if borehole is not for	or a water well)			
Owner Name Bruce Gab	Latit	ıde: <u>31 ° 55 '\3</u> 1	Longitude: 11 25,46th	
	Method of Lat/Long (circle or		ne): Conventional Survey,	
Mailing Address: 453 Cr 80		USGS quad, Hand-held	GPS Survey-grade GPS	
Raleigh M.	4 3953 Su	14 5E 14 Sec 13	Twn IM Rng 8E	
City Stat	ie Zip Code Dista	nce Direction Miles	Nearest Town	
Telephone No. ()		Nines	or Raising	
	Well / Borehole D	ata		
Date drilling started: 1 5 pb Date drilling completed: 1 6 pb Hole depth: 300 Hole diameter: 5				
Location of the source of any surface water used for drilling: Keys Mill Creek 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):				
Purpose of borehole (check one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump				
	Survey Other (describe) to water_well construction, skip	the remainder of this blo	ock	
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 offeet Type of grout (circle one): Neat Cement Bentonite Mix				
Casing length:feet Casing diameter:inches Type of casing:				
Screen length:feet Screen diameter:inches Type of screen:				
Screen slot size:inches Setting depth: Fromfeet tofeet				

Underreamed Telescoped Open hole

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

Type of completion (circle all applicable): Gravel packed

Top of lap pipe or reduction in casing:

Other (describe):

Form: OLWR-SWR-1A

Natural Development

The sketch below only required for water wells

<u>If</u>	well	teles	copes,	show	depths	on	sketch
	Gro	ound	Level.		7		

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

Description of Formations Encountered	From (depth)	o (depun)
Sund	Ground Level	26
Clay.	26	55
Sand	55	67
May.	67	203
ROCK	203	207
Clary	207	230
Sant	220	760
Clay	260	265
SITTYCKY	265	300
271.7	_	

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

ketch 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.

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

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BY: OLWR