	State W	ell Report	For Office Use Only:
County: Sunflower		riller's Log	Aquifer: A 75
		of Environmental Quality	
Permit #: GW-46314 / A6313		d Water Resources	Well #:
Driller: Irrigation Equipment		lox 2309	L.S. Elevation:
Date drilling completed: 05/30/2012		MS 39225	E-log #:
		061-5210	
•	(601) 961	-5228 (fax)	
State Law requires t	that this report be prepared by	y the license holder responsi	ble for the work and filed with the
	above address within 30 days		
Information on Well Owner (Landowner if borehole is not for a water well)		Well or Borehole Location	
	noi jor a waier weii)		
Owner Name Leroy Johnson		Latitude: $33^{\circ}57'$	<u>19</u> " Longitude: <u>90</u> ° <u>38</u> ' <u>56</u>
Mailing Address: 51 Shelby Road		Method of Lat/Long (check or	ne): Conventional Survey,
			Hand-held GPS, 🗌 Survey-grade GPS
Shelby	Ms 38774	NW 1/4 NE 1/4 Se	c <u>18</u> Twn <u>24N</u> Rng <u>4W</u>
City	State Zip code	SW	
,		Distance Directi	ion Nearest Town
Telephone No. () -		6 Miles Eas	t of Shelby
	Well / Be	orehole Data	
		· · · · · · · · · · · · · · · · · · ·	
Method of dosing and volume of Chlori Logs run (check all applicable): 🖾 No Name of organization running log(s):		a Ray 🗍 Density 🗍 Sonic [] Neutron [] Other:
Logs run (check all applicable): \boxtimes Non- Name of organization running log(s):	olog run 🔲 Electric 🔲 Gamma	a Ray Density Sonic [
Logs run (check all applicable): 🖾 No Name of organization running log(s): Purpose of borehole (check one): 🖾	b log run Electric Gamma Water Well Geotechnical	Ray Density Sonic [Neutron Other:
Logs run (check all applicable): 🖾 No Name of organization running log(s): Purpose of borehole (check one): 🖾	o log run Electric Gamma Water Well Geotechnical Seismic Survey Other (4)	a Ray Density Sonic [//Geological Investigation describe)	Ground Source Heat Pump
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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)
Clay	Ground level	25
Brown Sand	26	45
Medium Sand	46	65
Course Sand	66	75
Course Sand & Gravel	76	105
Clay	106	108
· · · · · · · · · · · · · · · · · · ·	-	
·····		

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

aid in lo	but and include the followin cating the well; 3) any road th arrow.	ng: 1) the well location; 2 ds, power lines, or other it) any permanent structures on ems that may aid in locating th	the property that may a property and the well;
Landowner Name:	Leroy Johnson			
I certify that the well/borel Mississippi Department of laws. Patrick Chism 0695 Print Name of Responsible License	Environmental Quality and	l, and completed in accorda the Mississippi Departmen 06/16/2012 Date	nce with all applicable requirem t of Heath regulations, if applie Signature of Licensee	Form: OLWR-SWR-1A (04/08) nents of the cable, and state

JUN 2 7 2012

BY: OLWA

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RECEIVED

STATE	WELL	REP	ORT
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County:	Sunflower
Permit #:	GW-46314 46313
	Irrigation Equipment
Date drilling completed: 05/30/2012	
<u>Copy inf</u>	formation from block on Part 1

Part 2 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 (601) 961-5228 (fax)

For Office Use Only:			
Aquifer:			
Well #:	A75		
Elevation:	х. 		

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 Owner Information		Well Location	
Owner Name: Leroy Johnson		Latitude: 33 57' 19 N Longitude: 90 38' 56 W	
Mailing Address: 51 Shelby Road		Method of Lat/Long (check one):	
		🗌 USGS quad, 🛛 Hand-held GPS, 🔲 Survey-grade GPS	
Shelby	Ms 38774	NW 1/4 NE 1/4 Sec 18 T 24N R 4W	
City	State Zip code	SW Distance Direction Nearest Town	
Telephone No. () -		<u>6</u> Miles <u>East</u> of <u>Shelby</u>	
Pump Type Check one		Power Type Check one	
🗌 Air Lift 🔄 Jet	Submersible	Diesel Engine 🔲 Gasoline Engine 🗍 Natural Gas	
Bucket Diston	I Turbine	Electric Motor Hand Tractor PTO	
Centrifugal Rotary	Flowing Well	Windmill Other (specify):	
Other (specify):		Horse Power Rating of Motor: 60	
Date Pump Installed: 06/05/2012		Setting Depth: _70 feet	
Rated Pump Capacity 2300+/-	Gallons Per Minute	Number of Stages: 2	
Pump Test Dat	a	Method of Measuring Water Level Check one	
Date Well Tested:		Air Line Electric Measuring Line Steel Tape	
Static Water Level (A):	Feet Below Land Surface	Other (specify):	
Pumping Water Level (B):	Feet Below Land Surface		
Drawdown [(B) - (A)]:	Feet Below Land Surface	For flowing well, measured shut 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	
This is for (check one): New Well Replacement of Existing Pump Repair of Existing Pump			
I HEREBY CERTIFY that the above statements are true to the best of my knowledge			
Patrick Chism Print Name of Pump Installer and License	0695 No. (if applicable)	Signature of Pump Installer RECEIVED	
······································		Form: OLIMP, SWR 7 C 407 109)	
Form provided by Forms On-A-Disk · 214-340-94	29 · FormsOnADisk.com	BY: OLWR	