State W	ell Report			
County: Sunflower P	art I	For Office Use Only:		
Permit #: Office of Land a	t of Environmental Quality	Aquifer:		
	and Water Resources Box 10631	Well #:		
Jackson, M	IS 39289-0631	L. S. Elevation:		
	961-5210			
(001)359	4-6938 (fax)	E-log #:		
State Law requires that this report be prepared by the driller in detail and filed with the Department within				
30 days of completion of drilling of the well. Well Owner Information	Wall	Location		
	· · · · · · · · · · · · · · · · · · ·			
Owner Name Wayne Vick	Latitude: 33 ° 96 '83	" Longitude: <u>690 ° 38 ° 78 "</u>		
Mailing Address: 216 Buckley - Jones Rd.	Method of Lat/Long (circle on	e): Conventional Survey,		
	USGS quad, Hand-held			
Cleve / and mc 38732 City State Zip Code	NE 4NE 4 Sec 18	Twn 22 N Rng 4 W		
Telephone No. (462) 843 - 8804	Distance Direction Miles WE	Nearest Town of Cleve land		
Well I	L Data			
Purpose of Well (circle one) Home Industrial Public Supply	Irrigation Fish Cultura	Othor Produce		
Date well drilling started: 12-15-07 Date				
If flowing, method of flow regulation: Valve Other (describe)				
Static Water Level: 33' feet above or below (circle one) land surface Date measured: 12-15-07				
Method of Measurement (circle one) steel tape electric tape air line other: Rope & weight				
Hole depth:/20' Well depth:/20'	Well grouted to a depth of _	feet		
Type of grout (circle one): Cement Bentonite Mix		·		
Casing length: 80 feet Casing diameter: 4 inches Type of casing: PVC				
Screen length: 40 feet Screen diameter: 4 inches Type of screen: PVC 5 to Hed				
Screen slot size:				
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 back of page				
Logs run (circle all applicable): No log run Electric Gamma Ray	Density Sonic Neutron	Other:		
Name of organization running log(s):				
I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi				
Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.				
Willie L. Bryant 0-0639	Wille a	1. Buyant		
Print Name of Water Well Contractor and License No.	•	Water Well Contractor		

Drilled For; Peacock Pump + Repair

Clay + Med. Sand Med. + Charse Sand Coarse Sand Grave grave grave)	Ground Level	Description of Formations Encountered F
Clay + med. sand Med. + Charse sand Coarse Sarvel + gravel grave		- Clay
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Coarse Sarel & grave		Med & Charse sand
grave		Carrel & avail & availe!
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If more than one screen, show location of each on sketch

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Will's L. Buyant Signature of Water Well Contractor