State W	Vell Report	
County: Sunffaces Part 1-1	Driller's Log	For Office Use Only:
	nt of Environmental Quality	Aquifer:
Permit #: Office of Land a	and Water Resources	Well#: <u>E142</u>
Driller: Office of Geology P.O.I	Box 10631	Well #
Jackson, N	AS 39289-0631	L. S. Elevation:
17 7)961-5210 4-6938 (fax)	E-log #: _ Ø-142
(001)33	4-0330 (lax)	E-10g#
State Law requires that this report be prepared by the lic Department at the above address within 30 days of com	ense holder responsible for i	the work and filed with the or borehole.
Information on Well Owner		rehole Location
(Landowner if borehole is not for a water well)	22 15 51	20. 2
Owner Name Schusor #4	-	" Longitude: 90 ° 34 ' 35 "
Mailing Address: Rule ville	Method of Lat/Long (circle or	
		GPS, Survey-grade GPS
	5F 1/4 Sec_2	Twn 22 WRng 4 W
City State Zip Code	Distance Direction Miles	Nearest Town
Telephone No. ()	Ivines	01
Well / Bore	ehole Data	
Date drilling started: 4/20	1	Hole diameter:
Location of the source of any surface water used for drilling: Method of dosing and volume of Chlorine used in drilling and devel	opprent: add /aul/	10000 ates
Logs run (circle all applicable): No log run Electric Gamma Ray Name of organization running log(s):		
Name of organization running log(s):	Feelogy	
Purpose of borehole (check one): Water Well Geotechnical/Geole	ogical InvestigationGround	Source Heat Pump
Seismic Survey Other (describe If drilling is not related to water_well constructio) n, skip the remainder of this blo	ock
Purpose of Well (check one): Home Industrial Public Supply		
If a flowing well, method of flow regulation: ValveO	ther (describe)	
Static Water Level:feet above or below (circle one) l	and 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 Cem	ent 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: From	feet to	feet
Type of completion (circle all applicable): Gravel packed Under	reamed 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

f well telescopes, show depths on sketch.			ulations
Ground Level	Description of Formations Encountered	From (depth)	To (depth
<u> </u>	- (160)	Ground Level	15
	Sanc	15	90
	aravel	90	140
	Shire	140	191
	Janey Elay	190	23
			<u> </u>
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			-
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			-
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•			<u> </u>
i			-
If more than one screen, show location of each on the property layout and include the following:	1) the well location; 2) any permanent structures on the	property that may	
etch the property layout and include the following:		property that may operty and the wel	I;
etch the property layout and include the following: aid in locating the well; 3) any roads, pov	1) the well location; 2) any permanent structures on the	property that may operty and the wel] ;
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Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state