	State W	ell Report		
E tom Player		Driller's Log	For Office Use Only:	
County: Sun / Buset		nt of Environmental Quality	Aquifer: 6/53	
Permit #: G-W 43 755	Office of Land and Water Resources		Well #:	
Driller Cook Drlg. Co., Mc.	P.O. Box 2309 Jackson, MS 39225			
Date drilling completed: 4.14 010	(601)	961- 5210	L. S. Elevation:	
(601)96		1- 5228 (fax)	E-log #:	
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.       Information on Well Owner     Well or Borehole Location     26				
(Landowner if borehole is not for a water well)				
Owner Name Rodney H. Walker		Latitude: 33° 37.87	. Longitude: 910-78-58 a	
Mailing Address: 74 Lockerham RL.		Method of Lat/Long (circle or	ne): Conventional Survey,	
			GPS, Survey-grade GPS	
Draw MS. 38773 City State Zip Code		NE 1/ NW 1/4 Sec 2 /.	Twn 21N Rng OY W	
City Stat Telephone No. (662) 843-17		Distance Direction Miles 72	Nearest Town of <u>3441775.</u>	
Well / Borehole Data				
Date drilling started: 4-14 Date drilling completed: 4-14.04 Hole depth: 12 Hole diameter: 22				
Location of the source of any surface water used for drilling:				
Logs run (circle all applicable): No log rur Name of organization running log(s):	n Electric Gamma Ray	Density Sonic Neutron	Other:	
Purpose of borehole (check one): Water W	ell Geotechnical/Geole	ogical Investigation Ground	Source Heat Pump	
	Survey Other (describe to water well construction	)	ock	
Purpose of Well (check one): Home Industrial Public SupplyIrrigation Fish Culture Other:				
If a flowing well, method of flow regulation: Valve Other (describe)				
Static Water Level: <u>46</u> feet ab	ove or below (circle one) I	and surface Date measured:	4-14-010	
Method of Measurement (circle one) steel tape electric tape air line other:				
Well depth / 20 Well grouted to a depth of feet Type of grout (circle one): Neat Cement Bentonite Mix				
Casing length: 80 feet Casing diameter: 10 inches Type of casing: FUC				
Screen length: $\underline{40}$ feet Screen diameter: $\underline{10}$ inches Type of screen: $\underline{900}$				
Screen slot size: 050 inches Setting depth: From 80 feet to 120 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. <u>If tel</u>	escoped or more than one scree	n, describe on next page	
			Form: OHVE OVP 11 (94/08	
			Kevenen	
			0.0010	

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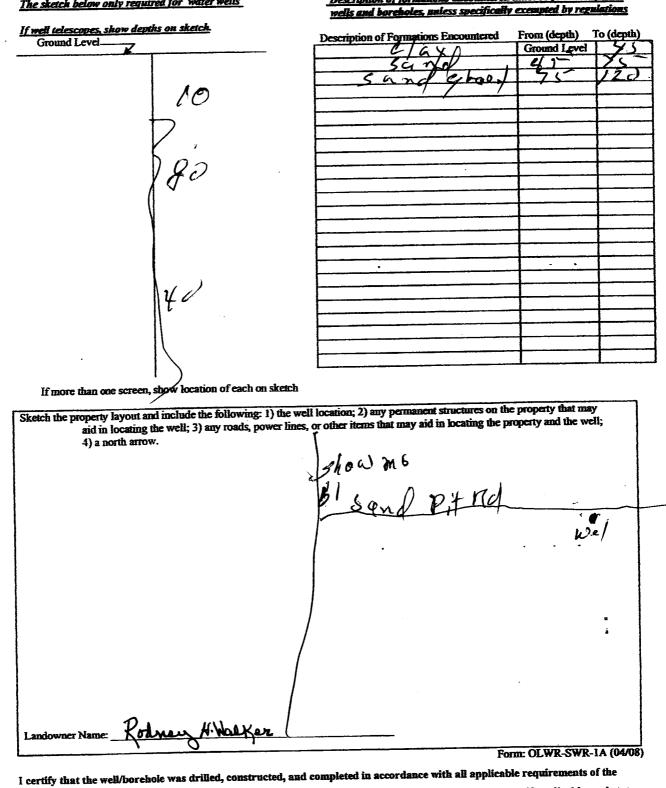
MAY 1 8 2010 BY: OLWF G153

MAY 1 8 2019

BY-OMR

Description of formations encountered must be provided for all

The sketch below only required for water wells



Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state

Co. Me. laws 4-14-010. L 20 -10 f RECEIVED Signature of Licensee Print Name of Responsible Licensee and License No. Date

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STATE WE	LL REPORT			
County: $S L n f 10000$ Permit #: $G W - 43755$ Prime: $G W - 43755$ Driller: $G W - 43755$ Dississippi Department Office of Land a P.O.1Date completed: $4 - 13010$ (601)Completed: $4 - 13010$ (601)(601)Completed: $4 - 13010$ (601)(601)	art 2 For Office Use Only:   completion Report Aquifer: 6/53   t of Environmental Quality Aquifer: 6/53   Box 2309 Well #:			
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 Location				
report must be attached and both parts filed with the Department a Well Owner Information	Well Location			
Owner Name: Rodney H. Walker Mailing Address: 74 Lockerhan Rd.	Latitude: <u>33-37836</u> Longitude: <u>93-38586</u> Method of Lat/Long (check one): Conventional Survey USGS quad <u>9</u> , Hand-held GPS, Survey-grade GPS			
Shaw MS. 38773	1/4 Sec_ 3 (_ T_ 2   R_ 0 4 10			
City State Zip Code	Distance Direction Nearest Town			
Telephone No. (662) 843-1753	8.5 Miles No & of Shaw m.S.			
	Power Type			
Pump Type Circle one	Circle one			
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas			
Bucket Piston Turbine	Electric Motor Hand Tractor PTO			
Taning Wall	Windmill Other (specify):			
Cemenugar	Horse Power Rating of Motor:			
Other (specify):	Setting Depth: feet			
Date Pump Installed:				
Rated Pump Capacity: 800 Gallons Per Minute	Number of Stages:			
	Method of Measuring Water Level			
Pump Test Data	Circle 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			
	feet afterhours of pumping			
Duration of Pump Test (minimum 4 hours):hours				
I HEREBY CERTIFY that the above statements are true to the best <u>COOLS</u> <u>DNILLINGENE</u> Print Name of Pump Installer and License No. (if applicable) 2	a of my knowledge Signature of Pump Installer Form: OLWR-SWR-18 (04/08) ED MAY 1 8 2010			
	BY: OLWF			