		· .
county: Tallahatchic State V Part 1-1	Vell Report	
Minelesine: Desit	Driller's Log	For Office Use Only:
	nt of Environmental Quality and Water Resources	Aquifer: H201
Dalla: P.O.	Box 2309	Well #:
	n, MS 39225 1961- 5210	L. S. Elevation:
(001)	1- 5228 (fax)	
		E-log #:
State Law requires that this report be prepared by the ite Department at the above address within 30 days of com	cense holder responsible for	the work and filed with the
	pleaon of artiling of the well	or borehole.
(Landowner if borehole is not for a water well)		
Owner Name Robert Shaw		In Longitude: 90 .21 .16.7"
Mailing Address: 1230 Gratio Rd.	Method of Lat/Long (circle or	
	USGS quad, Hand-held	GPS, Survey-grade GPS
Ridgely Tn. 38080 City State Zip Code	<u>NW 1/2 NE 1/2 Sec /</u>	VTwn 24N Rng 2W
City State Zip Code	Distance Direction	Nearest Town
Telephone No. ()	Miles	of <u>Sumner</u>
TTI II AM	<u> </u>	
Well / Bor Date drilling started: <u>5-16-11</u> Date drilling completed: <u>5-16</u>		744
	·	Hole diameter: <u>~</u>
Location of the source of any surface water used for drilling:	Surface Water slopment: <u>50 PPM</u>	
Logs run (circle all applicable) No log run Electric Gamma Ray Name of organization running log(s):		Other:
Purpose of borehole (check one): Water Well Geotechnical/Geo	logical Investigation Ground	1 Source Heat Pump
Seismic SurveyOther (describ		P
If drilling is not related to water well construction	e) on, skip the remainder of this bl	lock
Purpose of Well (check one): Home Industrial Public Suppl		······································
If a flowing well, method of flow regulation: Valve	•	
Static Water Level:feet above of below (circle one)	land surface Date measured:	
Method of Measurement (circle one) steel tape electric tape	e air line other:	
	e of grout (circle one): Neat Cem	nent Bentonite Mix
Casing length: 85 feet Casing diameter: 16	inches Type of casing:	PVC
Screen length: <u>40</u> feet Screen diameter: <u>16</u>	inches Type of screen:	PVC
Screen slot size: <u></u>	<u>86</u> feet to <u>1</u>	2 <u>5</u> feet
Type of completion (circle all applicable): Gravel packed Under	rreamed Telescoped Open	hole Natural Development
Other (describe):		
Top of lap pipe or reduction in casing:feet. If the	descoped or more than one scree	en. describe on next page
Circle S Irrigation wi	ll set pump	Form: OLWR-SWR-1A (04/08)
		RECEIVEN
	· .	MAY 2 3 2011
· · ·		1147 11 Co. C. C. C. (1)
		RV: MIME
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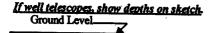
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4201

The sketch below only required for water wells



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	22
Fine Sand	23	38
Fine Sand + Gravel Medium Sand+ Gravel	39	54
Medium Sand + Orgvel	55	115
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If more than one screen, show location of each on sketch

Sketch 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.

Rohert Shaw Landowner Name:

Form: OLWR-SWR-1A (04/08)

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

laws. Patrick M. Chism 0695

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee



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געריים איז מיניים איז געריים איז ג		
County: TAUAHATCHIE	VELL REPORT Part 2	
Permit #: GW - 45080 Pump Install Mississippi Depart	er's Completion Report ment of Environmental Quality	For Office Use Only: Aquifer:
Driller IPETCATEDY FOUTUNE Office of La	nd and Water Resources O. Box 2309	
(6	son, MS 39225 01)961-5210	Well #: <u>Haol</u>
)961-5228 (fax)	Elevation:
This part of the report must be completed by a licensed water we report must be attached and both parts filed with the Department Well Owner Information	nt at the above address within 30 day	s of well completion.
Owner Name: Robert She	Well Location Latitude 33.59.53.78" Longitude: 90.021.16.79	
Mailing Address: 1230 Gratio Rd	Method of Lat/Long (check one	
	USGS quad, Hand-held G	
Ridgely, TN 38080	¼¼ Sec	· · · ·
City / State Zip Code	Distance Direction	Nearest Town
Telephone No. (131) 676 - 0999		SUMNER
Ритр Туре		
Circle one		r Type le one
Air Lift Jet Submersible	Diesel Engine Gasoline I	Engine Natural Gas
Bucket Piston Turbine	Electric Motor Hand	Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (spe	ecify):
Other (specify): Date Pump Installed: (J- Z9-1)	Horse Power Rating of Motor:	40
Can	Setting Depth:	feet
Rated Pump Capacity:Gallons Per Minute	Number of Stages:	
Pump Test Data Date Well Tested:	Method of Measu Circle	ring Water Level e one
Static Water Level (A): Feet Below Land Surface	Air Line Electric Measuri	ing Line Steel Tape
Pumping Water Level (B): Feet Below Land Surface	Other (specify):	
Drawdown [(B) – (A)]:Feet Below Land Surface	For flowing well, measured shut i	n head: feet
Test Pumping Rate:Gallons Per Minute	Well yieldedG	
Duration of Pump Test (minimum 4 hours):hours	feet after	
HEREBY CERTIFY that the above statements are true to the best of	of my knowledge.	KAM
Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Install	er montanta attaction
		Form: OLWR LUC
		orm: OLWRICE 14/20
		BV: OLWR
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