State Well Report County: Tallahatchie Part 1 - Driller's Log For Office Use Only:				
County: IAII A II A I E I I				
Mississippi Department of Environmental Quality Aquifer:				
Permit #:				
Driller: Pete Sapping tow P.O. Box 2309 Jackson, MS 39225				
Date drilling completed: 3/18/09 (601)961- 5210 L. S. Elevanon:				
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 (Landowner if borehole is not for a water well) Well or Borehole Location				
Landowner is dorente is not for a water well) Latitude: 33 ° 54 451 " Longitude: 90 ° 17 '240"				
Owner Name J. G. Flautt FARMS Latitude: 33 • 54 451" Longitude: 90 • 17 · 240"				
Method of Lat/Long (circle one): Conventional Survey.				
Mailing Address: P.O. Box 3.3.5				
USGS quad, Hand-held GPS, Survey-grade GPS				
E 1/ Me 2005 WE 1/4 Nov 1/4 Sec 34 Twn 24 Rng / W				
SWAN LAKE MS 38958 SE				
SNAN Lake M5 38958 City State Zip Code Distance Direction Nearest Town				
3 Miles N of Swam Lake				
Telephone No. (662) 515-6810				
Well / Borchole Data				
Date drilling started: 3/18/09 Date drilling completed: 3/18/09 Hole depth: 100 Hole diameter: 28				
Date drining started: 3/78/07 Date drining completed. 3/70/07 Note deput. 7- Date drining completed.				
Location of the source of any surface water used for drilling: Method of dosing and volume of Chlorine used in drilling and development: Sodium Hypo CHIORITE @ 10				
Method of dosing and volume of Chlorine used in drilling and development: Sodium Hy PO CHIORITE @ 1011				
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:				
Name of organization running log(s):				
Purpose of borehole (check one): Water Well X Geotechnical/Geological Investigation Ground Source Heat Pump				
Seismic Survey Other (describe)				
If drilling is not related to water well construction, skip the remainder of this block				
Purpose of Well (check one): Home Industrial Public Supply Irrigation_X Fish Culture Other:				
I tapose of well (circle one). House industrial I done buppy integrating 1 and outside of outside of outside of outside of outside of outside outside of outside outsi				
If a flowing well, method of flow regulation: Valve Other (describe)				
Static Water Level: 21 feet above of below (circle one) land surface Date measured: 43-18-09				
Static water Level: 6/1 reet above of below (circle one) land surface Date measured: 7/3/9.				
Method of Measurement (circle one) steel tape electric tape air line other:				
Well depth: 100 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonity Mix				
Casing length: 60 feet Casing diameter: 16 inches Type of casing: PVC				
Screen length: 40 feet Screen diameter: 16 inches Type of screen; PVC				
Screen length:				
Screen slot size: .032 inches Setting depth: From 60 feet to 100 feet				
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 next page				

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The sketch below only required for water wells

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)	Γo (depth)
Mud Class	Ground Level	45
Fine Sand / Gravel	45	55
Coarse Sand / Gravel	55	100
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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 structure aid in locating the well; 3) any roads, power lines, or other items that may aid in locating 4) a north arrow.	
Landowner Name: J. G. Flautt Farms	5
	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 of applicable, and state

laws.

ete Sappinetor

B436

4-3-09

Print Name of Responsible Licensee and License No.

Date

Signature of Licens

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