County: Tallahatchie		ELL REPORT		r Office Use Only:
	1	art 1	Well #:	NII4
Permit #:	Drille Mississippi Departmen	er's Log	Aquifer:	
Driller: Irrigation Equipment	Office of Land ar	nd Water Resources	E-Log #	
Date drilling completed: 07/22/13		Box 2309 IS 39225-2309		
·	(60 ¹)	961-5210 0-0535 (fax)		
State Law requires that this report	be prepared by the licer	nse holder responsi	ble for the we	ork and filed with the
Department at the above address v				
Well Owner Informa (Landowner if borehole is not fo		We	I or Borehole	Location
Owner Name: Edward Connell Jr.	· · · · · · · · · · · · · · · · · · ·	Latitude: 33 50' 25.	IN Longi	tude: 90 21' 59.6 W
Owner Name. Luward Commen St.			Longi	
Mailing Address: 30 Delta Ave.				Conventional Survey,
		🔲 USGS quad, 🖾 Ha		
Clarksdale Ms City Stat	38614	<u>SE</u> % <u>S</u>	SE 14, Sec 23 T	<u>23 N</u> R <u>2 W</u>
Telephone No. () -		Miles	West (Direction)	of Glendora (Nearest Town)
	Well / Bore	hole Data		
Date drilling started: 07/22/2013	Date drilling completed: 07	7/22/2013 Hole dept	h: <u>121</u>	Hole diameter: 24"
Location of the source of any surface wa	ter used for drilling: Su	face Water		
-	g			
Method of dosing and volume of Chloring	e used in drilling and develo	opment: 50 PPM		
Logs run (check all applicable): 🔯 No lo	g run 🔲 Electric 🔲 Gamm	a Ray 🗌 Density 🔲 S	Sonic 🗌 Neutro	n 🗋 Other:
Name of organization running log(s):				
Purpose of borehole (check one): 🛛 🛛	Vater Well 🛛 Geotechni	ical/Geological Investi	gation 🔲 Gr	ound Source Heat Pump
	Seismic Survey 🗍 OI	ther (describe)		
П				
		· · · · · · · · · · · · · · · · · · ·	maindan of t	his black
	lated to water well cons	· · · · · · · · · · · · · · · · · · ·	mainder of t	his block
If drilling is not rel		truction, skip the re		
<i>If drilling is not rel</i> Purpose of Well <i>(check all applicable)</i> :] Home 🗌 Industriai 🗋 Pu	truction, skip the re		
<i>If drilling is not rel</i> Purpose of Well (<i>check all applicable</i>):] Home 🗌 Industrial 🗋 Pu	truction, skip the re	n 🗋 Fish Cultur	e
<i>If drilling is not rel</i> Purpose of Well (check all applicable):] Home 🗌 Industrial 🗋 Pu	truction, skip the re	n 🗋 Fish Cultur	e
<i>If drilling is not rel</i> Purpose of Well (<i>check all applicable</i>): Other (<i>describe</i>): If a flowing well, method of flow regulation] Home 🗌 Industrial 🗋 Pul	truction, skip the re blic Supply 🛛 Irrigatio Other (describe)	n 🗋 Fish Cultur	e
If drilling is not real Purpose of Well (check all applicable): Other (describe): If a flowing well, method of flow regulation Static Water Level:] Home	truction, skip the re blic Supply 🛛 Irrigatio Other (describe)] land surface Da	n 🗋 Fish Cultur	e
<i>If drilling is not rel</i> Purpose of Well (<i>check all applicable</i>):	Home ☐ Industrial ☐ Pul on: Valve feet [☐ above or ☐ below (check one) Steel tape ☐ Electric tape	truction, skip the re blic Supply I Irrigatio Other (describe) land surface Da	n [] Fish Cultur Ite measured: (describe)	e
If drilling is not real Purpose of Well (check all applicable): Other (describe): If a flowing well, method of flow regulation Static Water Level: Method of Measurement (check one) Well depth: 121 Well grouted to a Casing length: 81	Home □ Industrial □ Pul on: Valve	truction, skip the re blic Supply I Irrigatio Other (describe) land surface Da Air line Dother: (Type of grout (check inches	n 🗌 Fish Cultur Ite measured: (describe) one): 🗌 Neat C Type of casing	re Terment ⊠ Bentonite □ M : PVC ECE // F
If drilling is not real Purpose of Well (check all applicable): Other (describe): 1 Other (describe): 1 If a flowing well, method of flow regulation Static Water Level: Method of Measurement (check one) Well depth: 121 Well grouted to a Casing length: 81	Home □ Industrial □ Pul on: Valve	truction, skip the re blic Supply I Irrigatio Other (describe) land surface Da Air line Dother: (Type of grout (check inches	n 🗌 Fish Cultur Ite measured: (describe) one): 🗌 Neat C Type of casing	re Terment ⊠ Bentonite □ M : PVCIECE ://E
If drilling is not real Purpose of Well (check all applicable): Other (describe): Other (describe): If a flowing well, method of flow regulation Static Water Level: Method of Measurement (check one) Well depth: 121 Well grouted to a Casing length: 81 Screen length: 40	Home □ Industrial □ Pul on: Valve	truction, skip the re blic Supply 🛛 Irrigation Other (describe) land surface Da Air line 🗌 Other: (Type of grout (check inches inches	n 🗌 Fish Cultur Ite measured: (describe) one): 🗌 Neat C Type of casing Type of screen	re erment ⊠ Bentonite □ M : <u>PVC ECEV/</u> E : <u>PVC</u>
If drilling is not real Purpose of Well (check all applicable): Other (describe): 1 other (describe): If a flowing well, method of flow regulation Static Water Level: Method of Measurement (check one) Well depth: 121 Well depth: 121 Screen length: 40 Screen slot size:	Home Industrial Pull on: Valve	truction, skip the re blic Supply ⊠ Irrigatio Other (describe)] land surface Da ⊡ Air line □ Other: (Type of grout (check inches From 82	n 🗆 Fish Cultur Ite measured: (describe) one): 🗆 Neat C Type of casing Type of screen feet to	re erment ⊠ Bentonite □ M : <u>PVC</u> : : <u>PVC</u> : <u>121</u> fee
If drilling is not real Purpose of Well (check all applicable): Other (describe): If a flowing well, method of flow regulation Static Water Level: Method of Measurement (check one) Well depth: 121 Well depth: 81 Casing length: 81 Screen length: 40 Type of completion (check all applicable)	Home Industrial Pull on: Valve	truction, skip the restriction, skip the restriction, skip the restriction blic Supply I Irrigation Other (describe) Other (describe) I land surface Data surface I nothers I nothers I nothers I nothers <td>n 🗌 Fish Cultur Ite measured: (describe) one): 🗌 Neat C Type of casing Type of screen feet to ole 🗌 Natural D</td> <td>eement ⊠ Bentonite □ M PVC E</td>	n 🗌 Fish Cultur Ite measured: (describe) one): 🗌 Neat C Type of casing Type of screen feet to ole 🗌 Natural D	eement ⊠ Bentonite □ M PVC E
If drilling is not real Purpose of Well (check all applicable): Other (describe): If a flowing well, method of flow regulation Static Water Level: Method of Measurement (check one) Well depth: 121 Well depth: 81 Casing length: 81 Screen length: 40 Type of completion (check all applicable): Other (describe): Top of lap pipe or reduction in casing:	Home Industrial Pull on: Valve	truction, skip the re blic Supply ⊠ Irrigatio Other (describe)] land surface Da ⊡ Air line □ Other: (Type of grout (check inches inches From 82 derreamed □ Open h	n 🗌 Fish Cultur Ite measured: (describe) one): 🗌 Neat C Type of casing Type of screen feet to ole 🗌 Natural C	re erment ⊠ Bentonite □ M : <u>PVC</u> : : <u>PVC</u> : <u>121</u> fee

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	For Office Use Only:
Well #:	NIL4

The sketch below only required for water wells

If well telescopes, show depths on sketch.

County: Tallahatchie Permit #: GW-46391

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Ground level K

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	33
Fine Sand & Gravel	34	48
Medium Sand & Gravel	49	121
	<u>†</u>	1
<u> </u>		
		+
	1	L

If more than one screen, show location of each on sketch

	ayout and include the following:			
1) the well locat	ion nt structures on the property that ma	v aid in locating the we	sil	
	ower lines, or other items that may air			
4) a north arrow		a in looding the proper		
Landowner Name:	Edward Connell Jr.			
			Form: OLWR-SWR-1A (04/08)	
THEREBY CERTIFY	that the well/borenole was drilled, co	instructed, and comple	eted in accordance with all applicable ississippi department of Health regulations,	
if applicable, and stat		and Quanty and the wa	ississippi gepartment of reality regulations,	
Patrick Chism	0695	08/26/2013		
	••••	Date	Signature of Licensee	KAR E-
Print Name of Resp	onsible Licensee and License No.	Date	Form: OLWR-SWR-1A (4/13)	
				213
				10 M A
P			the second s	. 5. <i>c</i> 1 2 54
			BY: OL	WA
			7 49 Rep.	化化 聊 把 表

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County: IPLIANATION Part 2 Permit #: Gwo - 46391 Pump Installer's Completion Report Driller: IPERICATION EQUIDES Date completed:
Driller: <u>IPETICATION</u> <u>EQUIPE</u> Driller: <u>IPETICATION</u> <u>EQUIPE</u> Date completed:
Date completed:
Date completed: P.O. Box 2309 Copy information from block on Part 1 Jackson, MS 39225-2309 Copy information from block on Part 1 (601)961-5210 (601) 360-0535 (fax) Aquifer: 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 completed by a licensed water well contractor or a licensed pump installer. A copy of Part 1 Well Owner Information Well Location Owner Name: IED IED CONVILL Latitude: Latitude: 230-50-2518 'Longitude: 90-21-58-471
Copy information from block on Part 1 (601)961-5210 (601) 360-0535 (fax) 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 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 Owner Information Well Location Owner Name: TED CONJEL Latitude: Latitude: 23 - 50 - 25.15 'Longitude: 20 - 20 - 12
(601) 360-0535 (fax) 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 Owner Information Owner Name: <u>TED CONJULE</u> Hallies Address - 20 of 1200
Well Owner Information Well Location Owner Name: TED CONVELL Latitude: 33.50.2519 'Longitude: 90.021.58.47x
Well Owner Information Well Location Owner Name: TED CONVELL Latitude: 33.50.2519 'Longitude: 90.021.58.47x
Owner Name: <u>TED_CONVILL</u> Latitude: <u>33050.25/17</u> Longitude: <u>900 21.58.47</u>
Method of Lat / one (check and) Commission (Commission)
, in the set of the se
Club Group Live USGS quad, Hand-held GPS, Survey-grade GPS
CLARFSWALS MS 38614 SE 4 SE 4, Sec 73 T 23N R OZW
Telephone No. $(h/2)$ $(h/2) = 9/1/1$ $(-1/1)$ Miles $-20/10$ of $-0.53B$
Telephone No. (242) 427-9641 (Distance) (Direction) (Nearest Town)
Pump Type (circle one)
Submersible (Turbine) Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe):
Date Pump Installed: Y-6-75 Rated Pump Capacity: 300.0 Gallons Per Minute
Is This Pump (circle one): (New) Repaired Replacement
Power Type (circle one)
Electric Gasoline Natural Gas Tractor PTO Windmill Other (describe):
Horse Power Rating of Motor: 40 Setting Depth: 70 feet Number of Stages: 4
Pump Test Data for Non Flowing Well
Station of Fully Test (infinition 4 hours): hours
Drawdown [/P) (Alt
Drawdown [{B) - (A)]:Feet Below Land Surface Test Pumping Rate: Gallons Per Minute
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe):
Pump Test Data for Flowing Well
Measured shut in head:feet.
Well yielded GPM with a drawdown of feet_after hours of pumping
/ Meter Installation
Aboton Manufactures
Meter Manufacturer: Meter Serial Number:
Meter Manufacturer: Meter Serial Number: Meter Model Number/Name: Type of Meter:
Meter Manufacturer:
Meter Manufacturer:
Meter Manufacturer: N/A Meter Serial Number: Meter Model Number/Name: Type of Meter:
Meter Manufacturer: N/A Meter Serial Number: Meter Model Number/Name: Type of Meter:
Meter Manufacturer: Meter Serial Number: Meter Model Number/Name: Type of Meter: Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): Type of Meter: Installation Date: Meter installed by: Installation Date: Meter installed by: Is This Meter (circle one): New Repaired Replacement Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards.
Meter Manufacturer:
Meter Manufacturer: Image: Meter Serial Number: Meter Model Number/Name: Type of Meter: Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): Type of Meter: Installation Date: Meter installed by: Installation Date: Meter installed by: Is This Meter (circle one): New Repaired Replacement Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. I HEREBY CERTIFY that the above statements are true to the best of my knowledge: Important: DANED P. HOLT 0-752.P
Meter Manufacturer: N/A Meter Serial Number: Meter Model Number/Name: Type of Meter: Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc.): Type of Meter: Installation Date: Meter installed by: Installation Date: Meter installed by: Installation Date: Meter installed by: Is This Meter (circle one): New Repaired Replacement Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. I HEREBY CERTIFY that the above statements are true to the best of my knowledge. Meter MDEQ Website. DAUED P. HOLT 0-752.P S-26-13 Print Name of Pump Installer and Lines S-26-13
Meter Manufacturer: N/A Meter Serial Number: Meter Model Number/Name: Type of Meter: Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): Type of Meter: Installation Date: Meter installed by: Important: Is This Meter (circle one): New Repaired Replacement New Repaired Replacement Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. The CENTER is on the MDEQ Website. I HEREBY CERTIFY that the above statements are true to the best of my knowledge. Meter Series is on the MDEQ Website. BY MANH DANED P. HOLT 0-752.P S-76-13 Meter Manufacturer standards. BY MANH