		State Well Report	For Office Use Only:
ſ	The	Part 1 – Driller's Log	
	County: <u>10. + C</u>	Mississippi Department of Environmental Quality	Aquifer:
	Permit #:	Office of Land and Water Resources	Well #: B- //G
		P.O. Box 10631	
1	Driller: Janes W Moson	Jackson, MS 39289-0631	L. S. Elevation:
	Date drilling completed: 11-4-05	(601)961-5210	12 1
	Date drining completed.	(601)354-6938 (fax)	E-log #:

4

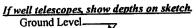
State Law requires that this report be prepared by the license holder responsible for the work and filed with the Department at the above address within 30 days of completion of drilling of the well or borehole.

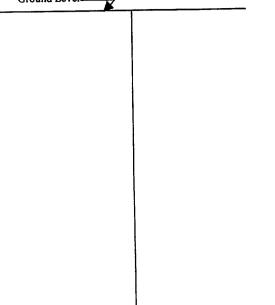
Department at the above address want 50 ways of the	Well or Borehole Location			
Information on Well Owner				
(Landowner if borehole is not for a water well)	Latitude: 34.41,913 " Longitude: 89.56,581. 35 35			
	Latitude:			
Owner Name Builders Construction	Conventional Survey.			
	Method of Lat/Long (circle one): Conventional Survey,			
107 65				
Mailing Address: LOT 65	USGS quad, Hand-held GPS, Survey-grade GPS			
Golden pond Scholizison				
Golden pond scoalorses.	NE 1 NE 1 Sec 32 Twn 45 Rng 7W			
20/18				
(<u>aldwater MS 38618</u> City State Zip Code	Distance Direction Nearest Town			
State Zin Code	Distance Direction Nearest Iown			
	<u>12 Miles E of Columber</u>			
Telephone No. (662) 429 - 4603				
Well / Bor	ehole Data			
	Lich Wate Homotory 8			
11-4-05 Data drilling completed: (1-4-C	Hole depth: 100 Hole diameter: 0			
Date drilling started: $11 - 4 - 05$ Date drilling completed: $(1 - 4 - 05)$				
Location of the source of any surface water used for drilling:	ـــــــــــــــــــــــــــــــــــــ			
Location of the source of any surface water used for drilling.	alonment: NIA			
Method of dosing and volume of Chlorine used in drilling and dev	exopriment			
Logs run (circle all applicable): No log run Electric Gamma Ra	D is Carrie Neutron Other			
Least sup (sincle all applicable); No log run Electric Gamma Ra	y Density Some Neurion Onion			
A second se				
Purpose of borehole (check one): Water Well Geotechnical/Ge				
Geotechnical/Ge	ological Investigation Ground Source Heat Pump			
Purpose of borehole (check one): water wenge Geotechnices of				
Seismic Survey Other (aescri	Seismic SurveyOther (describe)			
Seismic SurveyOther (describe) If drilling is not related to water well construction, skip the remainder of this block				
IT AFILING IN ADI / CLUCCE TO MALO	ion, skip the remainder of this otoen			
	ion, skip the remainaer of this otoes			
Home Industrial Public Sup	bly Irrigation Fish Culture Other:			
- Swall (sheek one): Home Industrial Public Sup	olyIrrigationFish CultureOther:			
- Swall (sheek one): Home Industrial Public Sup	olyIrrigationFish CultureOther:			
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Purpose of Well (check one): Home Industrial Public Sup	oly Irrigation Fish Culture Other:			
Purpose of Well (check one): Home Industrial Public Support If a flowing well, method of flow regulation: Valve NA	oly Irrigation Fish Culture Other: Other (describe) e) land surface Date measured: / 1 - 4 - 65			
Purpose of Well (check one): Home <u>Industrial</u> Public Supp If a flowing well, method of flow regulation: Valve <u>VA</u>	oly Irrigation Fish Culture Other: Other (describe) e) land surface Date measured: _/ ! -			
Purpose of Well (check one): Home <u>Industrial</u> Public Supplif a flowing well, method of flow regulation: Valve <u>VA</u> Static Water Level: <u>38</u> feet above or below (circle one) Method of Measurement (circle one) steel tape electric ta	olyIrrigationFish CultureOther: Other (describe) e) land surface Date measured: <u>/1-4-65</u> pe air line other: <u>Strivs [weight</u>			
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The sketch below only required for water wells

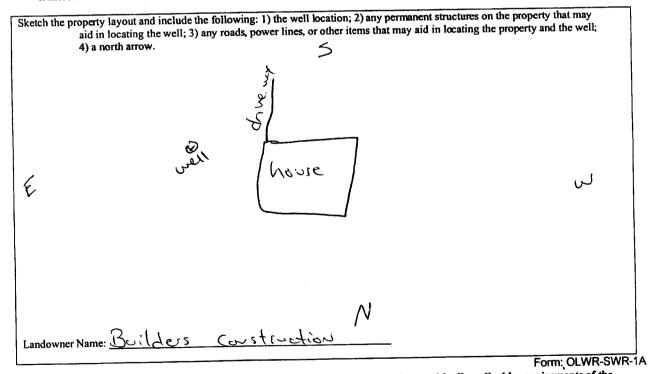




Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth)	To (depth)
Clay dict.	Ground Level	30
groet	30	38
inte soud	<u>3ల</u> 3ల	50
while clay	50	90
·white sound	<u> </u>	110
		
	_	
	+	
	-	
		+

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



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. 500 0-620 11-30-05

for ul

Print Name of Responsible Licensee and License No.

Date

/ Signature of Licensee

DEC 0 5 2005 BY: OLWR

STATE WELL REPORT						
County: Table Pu Permit #:	Part 2mp Installer's Completion Reportppi Department of Environmental Qualityffice of Land and Water ResourcesP.O. Box 10631Jackson, MS 39289-0631(601)961-5210(601)354-6938 (fax)ed water well contractor or a licensed pump itDepartment at the above address within 30 dWellLatitude: $34 \cdot 41 \cdot 513$ SSMethod of Lat/Long (check orLUI SGS quad Hand-heldCode	$\begin{array}{c} \underline{ays of well completion.}\\ \hline \textbf{ILocation}\\ \underline{\ Longitude: 89.55581}\\ \hline \textbf{3.5}\\ \hline \textbf{ne}: Conventional Survey}_{}\\ \hline \textbf{IGPS}_{}, Survey-grade GPS_{}\\ \hline \underline{\partial}_{T} \underline{\ 45} R \underline{\ 755}\\ \hline \end{array}$				
Telephone No. (662) 429-4603	Distance Direction	Nearest Town of <u>Coldwoter</u>				
Pump Type Circle one Air Lift Jet Bucket Piston Bucket Piston Centrifugal Rotary Flowing Other (specify): Date Pump Installed: Id= Id= Id= Id= Gallons I	ible Diesel Engine Gasoli Electric Motor Hand Well Windmill Other Horse Power Rating of Motor Setting Depth: 8	(specify): r: Ofeet				
Pump Test Data Date Well Tested: $11 - 4 - 05^{-}$ Static Water Level (A): 38^{-} Feet Below La Pumping Water Level (B): NA^{-} Feet Below La Drawdown [(B) - (A)]: NA^{-} Feet Below La Test Pumping Rate: 12^{-} Gallons I Duration of Pump Test (minimum 4 hours): 24^{-}	Air Line Electric Me nd Surface Other (specify):	shut in head: <u>NA</u> feet GPM with a drawdown of				
I HEREBY CERTIFY that the above statements are <u>Jones</u> い <u>Mesc</u> Print Name of Pump Installer and License No. (if app	Jono w. M	Installer Form: OLWR-SWR-1B RECEIVEI				

A A N N

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