	64-4- V	7-11 Damant	
		ell Report	For Office Use Only:
County: Tote	Part 1 – Driller's Log		-
Permit #:	Mississippi Department of Environmental Quality		Aquifer:
	Office of Land and Water Resources P.O. Box 230		Aquifer: Well #: J- 82
Driller: James w. Mason	Jackso	n, MS 39225	L. S. Elevation:
Date drilling completed: $2 - 5 - 09$	(601)	961- 5210 1- 5228 (fax)	E-log #:
State Law requires that this repo			the work and filed with the
Department at the above addres			
Information on Well			rehole Location
(Landowner if borehole is not	Latitude 34 ° 28 ' 120' Longitude C/° 71		Longitude: 87. 41,654,
Owner Name Hoiley Akin	-2	s-	
•		Method of Lat/Long (circle or	ne): Conventional Survey,
Mailing Address: 137 Jose-	Potrick rd		GPS, Survey-grade GPS
		SW / SE / Sec 14	Twn 55 Rng 500
Servestobic A City St	ns 386608		
City St	tate Zip Code	Distance Direction	Nearest Town
	<b>`</b>	Miles IN	of wyotte
Telephone No. (901) 496-8	<u>J+)</u>		
	Well / Bore	chole Data	
Date drilling started: 2-5-09 Date d	frilling completed: <u> </u>	<u>09</u> Hole depth: <u>170'</u>	Hole diameter: 63/4
Location of the source of any surface wa Method of dosing and volume of Chlorin	ter used for drilling: <u>0</u>	A lonment: LA	
Method of dosing and volume of emotion			·····
Logs run (circle all applicable): No log run Name of organization running log(s):	un Electric Gamma Ray	Density Sonic Neutron	
Purpose of borehole (check one): Water V	Well <u>Geotechnical/Geo</u>	logical Investigation Ground	Source Heat Pump
Seismic	c Survey Other ( <i>describe</i>	2)	
If drilling is not relate	ed to water well construction	-) I is the second seco	ack
		on, skip the remainaer of this <u>bio</u>	//.*
	<b>X</b> 1 12.1 10.111 00.1		
Purpose of Well (check one): Home	Industrial Public Suppl		
Purpose of Well (check one): Home		yIrrigationFish Culture	
If a flowing well, method of flow regulati	ion: Valve <u>~~</u> (	yIrrigationFish Culture	Other:
If a flowing well, method of flow regulati Static Water Level: $\underline{90}$ feet a	ion: Valve <u>~~</u> ( above or below circle one)	yIrrigationFish Culture Other (describe) land surface Date measured:	Other:
If a flowing well, method of flow regulati Static Water Level: <u><u>9</u>0 feet a Method of Measurement (circle one)</u>	ion: Valve $\mathcal{NA}$ ( above or below circle one) steel tape electric tape	yIrrigationFish Culture Other (describe) land surface Date measured: air line other:	- Other: 2-6-09 tring love ight
If a flowing well, method of flow regulati Static Water Level: $90$ feet a Method of Measurement (circle one) Well depth: <u>170</u> Well grouted to a d	ion: Valve $\mathcal{N}\mathcal{A}$ ( above of below circle one) steel tape electric tape lepth of <u>10</u> feet Type	yIrrigationFish Culture Other (describe) land surface Date measured: air line other: e of grout (circle one): Neat Cem	Other: 2-6-09 tring I weight ent Bentonite Mix
If a flowing well, method of flow regulations $f_{0} = \frac{1}{20}$ feet a method of Measurement (circle one) for the set of the set o	ion: Valve $\mathcal{NA}$ ( above of below circle one) steel tape electric tape depth of <u>10</u> feet Type sing diameter: <u>4</u>	yIrrigationFish Culture Other (describe) land surface Date measured: air line other: e of grout (circle one): Neat Cem inches Type of casing:	Other: $2 - C_0 - O 9$ $4 - C_0$
If a flowing well, method of flow regulati Static Water Level: <u>90</u> feet a Method of Measurement (circle one) Well depth: <u>170</u> Well grouted to a d Casing length: <u>160</u> feet Cas Screen length: <u>10</u> feet Scr	ion: Valve $\mathcal{N} \mathcal{A}$ ( above or below circle one) steel tape electric tape depth of <u>10</u> feet Type sing diameter: <u>4</u> reen diameter: <u>4</u>	yIrrigationFish Culture Other (describe) land surface Date measured: air line other: e of grout (circle one): Neat Cem inches Type of casing: inches Type of screen:	$\frac{\partial - (2 - 1) \varphi}{\partial - (2 - 1) \varphi}$ $\frac{\partial - (2 - 1) \varphi}{\partial - (2 - 1) \varphi}$ $\frac{\partial - (2 - 1) \varphi}{\partial - (2 - 1) \varphi}$ $\frac{\partial - (2 - 1) \varphi}{\partial - (2 - 1) \varphi}$
If a flowing well, method of flow regulati Static Water Level: $\underline{90}$ feet a Method of Measurement (circle one) Well depth: $\underline{170}$ Well grouted to a d Casing length: $\underline{160}$ feet Cas Screen length: $\underline{10}$ feet Scr Screen slot size: $\underline{9}$ inches	ion: Valve $\cancel{\mathcal{NA}}$ ( above or below circle one) steel tape electric tape depth of $\cancel{10}$ feet Type sing diameter: $\cancel{4}$ reen diameter: $\cancel{4}$ Setting depth: From _	yIrrigationFish Culture Other (describe) land surface Date measured: air line other: e of grout (circle one): Neat Cem inches Type of casing: inches Type of screen: /GOfeet to/	Other: $\partial - G - Q 9$ f(ing   weight ent Bentonite Mix $\rho \cup ($ $\rho \cup ($ 20 feet
If a flowing well, method of flow regulati Static Water Level: <u>90</u> feet a Method of Measurement (circle one) Well depth: <u>170</u> Well grouted to a d Casing length: <u>160</u> feet Cas Screen length: <u>10</u> feet Scr	ion: Valve $\begin{tabular}{c} \begin{tabular}{c} $	yIrrigationFish Culture	$\begin{array}{c} Other: \_ \\ \hline \hline \\ \hline$
If a flowing well, method of flow regulati Static Water Level: $\underline{90}$ feet a Method of Measurement (circle one) Well depth: $\underline{170}$ Well grouted to a d Casing length: $\underline{160}$ feet Cas Screen length: $\underline{10}$ feet Scr Screen slot size: $\underline{9}$ inches	ion: Valve $\begin{tabular}{c} \begin{tabular}{c} $	yIrrigationFish Culture	$\begin{array}{c} Other: \_ \\ \hline \hline \\ \hline$

## The sketch below only required for water wells

If well telescopes, show depths on s

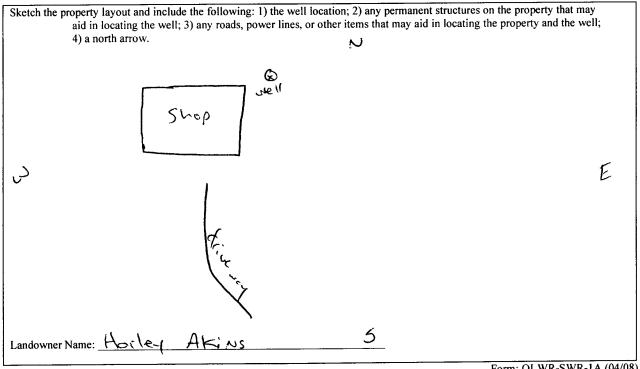
Ground Level\_

Description of Formations Encountered	From (depth)	To (depth)
		15
		35
		03
		110
white soud-	1.0	0(1
· · · · · · · · · · · · · · · · · · ·		
	Description of Formations Encountered	Cley dirt Ground Level red Sand 15 while sand 35 while clay 80

Description of formations encountered must be provided for all

wells and boreholes, unless specifically exempted by regulations

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



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.

2-2-091 0-620 Jones w. Moson tera Signature of Licensee Date

Print Name of Responsible Licensee and License No.

STATE WELL REPORT		
County: Tote	Part 2 Pump Installer's Completion Report	For Office Use Only:
Permit #:	Mississippi Department of Environmental Quality Office of Land and Water Resources	Aquifer:
Driller: Jones W-Meson Date completed: 3-6-09	P.O. Box 2309 Jackson, MS 39225	Well #: J-82
Copy information from block on Part 1	(601)961-5210 (601)961-5228 (fax)	Elevation:

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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	Well Location
Owner Name: Hailey Akins	Latitude: 34-38-722 Longitude: 89.41.654
Mailing Address: 137 Josen Petrick rd.	Method of Lat/Long (check one): Conventional Survey,
	USGS quad, Hand-held GPS, Survey-grade GPS
Seratobia MJ. 38660	<u>5 W 4 SE 4 Sec 14 T 55 R 500</u>
City State Zip Code	Distance Direction Nearest Town
Telephone No. (201) 496 - 8227.	Miles of whatte

	Pump Type Circle one			Power Type Circle one	
Air Lift	Jet	Submersible	Diesel Engine	Gasoline Engine	Natural Gas
Bucket	Piston	Turbine	Electric Motor	Hand	Tractor PTO
Centrifugal	Rotary	Flowing Well	Windmill	Other (specify): _	
Other (specify):			Horse Power Rating	g of Motor: l	цр.
Date Pump Installed: _	2-6-09		Setting Depth:	\$ 140	feet
Rated Pump Capacity:	(0	Gallons Per Minute	Number of Stages:	10	

Pump Test Data	Method of Measuring Water Level Circle one	
Date Well Tested: $\frac{\partial}{\partial} - 6 - 09$	Air Line Electric Measuring Line Steel Tape	
Static Water Level (A): <u>90</u> Feet Below Land Surface	Other (specify): _ string [weight	
Pumping Water Level (B): <u>NA</u> 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	
Duration of Pump Test (minimum 4 hours):hours	- feet after $-$ hours of pumping	

I HEREBY CERTIFY that the above statements are true to the best	t of my knowledge.
Janes W. Mosar 0-620	Jons w. Men
Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer Form: OLWR-SWR-1B (04/08)
	FORM: OLVVR-JVR-TB (04/06)

. Der Sax