	State W	ell Report	
County: Wiow		Part 1	For Office Use Only:
•		at of Environmental Quality	Aquifer:
Permit #:		and Water Resources	
Driller: Leaper Drillian		3ox 10631	Well #: _ <i>K</i> - 31
	Jackson, N	IS 39289-0631	L. S. Elevation:
Date drilling completed:		961-5210	
	(601)35	4-6938 (fax)	E-log #:
State Law requires that this repo 30 days of completion of drilling	ort be prepared by the of the well.	driller in detail and filed w	ith the Department within
Well Owner Informa	tion	Well	Location
Owner Name Aybur Az	zlin	Latitude:°'	" Longitude:'"
Mailing Address: 152 57 Hiw	1Ay 355	Method of Lat/Long (circle on	e): Conventional Survey,
~ //		USGS quad, Hand-held	GPS, Survey-grade GPS
Nau Albany A	$\frac{7}{5}$ $\frac{3}{6}$ $\frac{5}{5}$ $\frac{3}{5}$ $\frac{5}{5}$ $\frac{3}{6}$ $\frac{5}{5}$ $\frac{3}{6}$ $\frac{5}{6}$ $\frac{3}{6}$ $\frac{3}{6}$ $\frac{5}{6}$ $\frac{3}{6}$ $\frac{3}{6}$ $\frac{5}{6}$ $\frac{3}{6}$ $\frac{3}$	¼¼ Sec 3	Twn & S Rng /c
Telephone No. (662) 538-/	444	Distance Direction	Nearest Town of New Albary
	Well 1	Data Data	
Purpose of Well (circle one Home Inde	ustrial Public Supply		Other:
Date well drilling started: 9-15.	Date v	well drilling completed:	-16-05
If flowing, method of flow regulation: Val-	ve Other (d	escribe)	
Static Water Level:feet abo	$\overline{}$	Tara and a second	9-17-05
Method of Measurement (circle one)			
Hole depth: 435 Well dep	th: 435	Well grouted to a depth of _	feet
Type of grout (circle one): Cement	Bentonite Mix		Pu
Casing length: 240 feet Casing			
Screen length: 40 feet Scree	n diameter:	inches Type of screen:	foc
Screen slot size: o/ . inches	i de la companya de		
Type of completion (circle all applicable):	•	eamed (Telescoped) Open h	nole Natural Development
	Other (describe):		
Top of lap pipe or reduction in casing:	feet. If tel	escoped or more than one scre	en, describe on back of page
Logs run (circle all applicable): No log run	Electric Gamma Ray	Density Sonic Neutron (Other:
Name of organization running log(s): I certify that the well was drilled, constru	cted, and completed in a	reordance with all analisable	acularia est. Set. Set.
Department of Environmental Quality as	dor the Missississis	cordance with an applicable r	equirements of the Mississippi
Department of Environmental Quality an	. #		mu state laws.
//	, Ng 00-		Leeper -
Print Name of Water Well Contractor and L	icense No.	Signature of V	Vater Well Contractor

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If well telescopes please sketch below and show depths.

-1	Ground Level		Description of Formations Encountered	From	To	
/(Top Clay	0	20	1
1.		/ +	Blue Clay	20	ನ್ನ	U
435	MY	- Gost STATIC	CHALK	330	39	S
450		-	Sand	395	4	_د
75		-240 xt q"				
		Casing				
1						
	!	-40 st2"				
		-40 pt 2" Squad				
	es.					

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 aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the pro-4) indicate direction.	property that may operty and the well;
House	
[well	
Landowner Name: Rayburd Azlin	

Signature of Water Well Contractor

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STATE WELL REPORT

Part 2

Pump Installer's Completion Report
Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 10631

Permit #:

Date completed:

Jackson, MS 39289-0631 (601)961-5210 (601)354-6938 (fax)

For Office Use Only:
Aquifer:
Well#: K- 31
Elevation:

Mailing Address: 152 57 14 iway 355 Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GP Was Albary MS 38652 City State Zip Code Distance Direction Nearest Town Telephone No. 622 538-1444 Pump Type Circle one Air Lift Jet Submersible Diesel Engine Gasoline Engine Natural Grant Bucket Piston Turbing Circle One Rethod of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GP ———————————————————————————————————	·	54-6938 (fax) Elevation:	
Owner Name: Latitude: Longitude: Method of Lat/Long (circle one): Conventional Survey, Wethod of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GP Was Albary MS 38653 City State' Zip Code Distance Direction Nearest Town Circle one Pump Type Circle one Air Lift Jet Submersible Diesel Engine Gasoline Engine Natural G Bucket Piston Turbine Electric Motor Hand Tractor PT Centrifugal Rotary Flowing Well Other (specify): Date Pump Installed: 9-17-05 Rated Pump Capacity: O Gallons Per Minute Pump Test Data Method of Lat/Long (circle one): Conventional Survey, Metho		ail and filed with the Department within 30 days of the	instantation of pump.
Owner Name:		Well Location	Well Owner Information
USGS quad, Hand-held GPS, Survey-grade GP Not A bary N S 386 52 14 4 4 14 Sec 15 Twn 15 Rng 15	 	Latitude:Longitude:	
New A/bary N S 38652 N S Sec Twn Sec		Method of Lat/Long (circle one): Conventional Survey,	Mailing Address: 152 57 Hiway 355
Telephone No. 62 538-1444 Pump Type Circle one Air Lift Bucket Piston Turbine Centrifugal Rotary Flowing Well Other (specify): Date Pump Installed: 7-17-05 Bated Pump Capacity: Distance Direction Nearest Town N	PS	USGS quad, Hand-held GPS, Survey-grade GPS	A
Telephone No. (662) \$38-1444	<u> </u>		City State' Zip Cr
Pump Type Circle one Air Lift Bucket Piston Turbine Centrifugal Rotary Flowing Well Other (specify): Date Pump Installed: Rated Pump Capacity: Pump Test Data Pump Type Circle one Diesel Engine Gasoline Engine Natural G Windmill Other (specify): Horse Power Rating of Motor: Setting Depth: Number of Stages: Pump Test Data Method of Measuring Water Level		Distance Direction Nearest Town	11
Circle one Natural Grading of Motor: Tractor PT Centrifugal Other (specify): Horse Power Rating of Motor: Setting Depth: Setting Depth: I O		11 Miles SW of New Albany	Telephone No. (962) 5 38-1444
Air Lift Jet Submersible Diesel Engine Gasoline Engine Natural Gasoline Engine Natural Gasoline Engine Diesel Engine Electric Motor Hand Tractor PT Centrifugal Rotary Flowing Well Other (specify): Horse Power Rating of Motor: Setting Depth: Rated Pump Capacity: Pump Test Data Method of Measuring Water Level		Power Type	
Bucket Piston Turbine Electric Motor Hand Tractor PT Centrifugal Rotary Flowing Well Windmill Other (specify): Date Pump Installed: 9-17-05 Rated Pump Capacity: 10 Gallons Per Minute Number of Stages: 1/ Pump Test Data Method of Measuring Water Level		Circle one	Chcle one
Centrifugal Rotary Flowing Well Other (specify): Date Pump Installed: 7-17-05 Rated Pump Capacity: 10 Gallons Per Minute Pump Test Data Method of Measuring Water Level	Gas	Diesel Engine Gasoline Engine Natural Gas	Air Lift Jet Submersible
Other (specify): Date Pump Installed: 9-17-05 Rated Pump Capacity: 0 Gallons Per Minute Number of Stages: 1/ Pump Test Data Method of Measuring Water Level	OT	Electric Motor Hand Tractor PTC	Bucket Piston Turbine
Date Pump Installed: 7-17-05 Setting Depth: 100 feet Rated Pump Capacity: O Gallons Per Minute Number of Stages: // Pump Test Data Method of Measuring Water Level		omer (specify).	Centrifugal Rotary Flowing We
Rated Pump Capacity:		Horse Power Rating of Motor: 3/4 ++-	
Pump Test Data Method of Measuring Water Level		Setting Depth:feet	
Witchood of Measuring Water Level		Number of Stages://	Rated Pump Capacity: Gallons Per M
Date Well Tested: 9-17-05 Circle one		Mathod of Magnetic VV.	Pump Test Data
			Date Well Tested: 9-17-05
Static Water Level (A): Feet Below Land Surface Air Line Electric Measuring Line Steel Tape	·	Air Line Electric Measuring Line Steel Tape	Static Water Level (A): 60 Feet Below Land St
Pumping Water Level (B):Feet Below Land Surface Other (specify):		Other (specify):	
Drawdown [(B) - (A)]:Feet Below Land Surface For flowing well, measured shut in head:fee	eet	For flowing well, measured shut in head:feet	Drawdown [(B) – (A)]:Feet Below Land St
Test Pumping Rate: Gallons Per Minute Well yielded GPM with a drawdown of		<u> </u>	Test Pumping Rate:Gallons Per M
Duration of Pump Took (minimum 4.1)		feet afterhours of pumping	Duration of Pump Test (minimum 4 hours):h
I HEREBY CERTIFY that the above statements are true to the best of my knowledge. Print Name of Pump Installer and License No. (if applicable) Structure of Pump Installer.		f my knowledge.	LEEPER DELLINE

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