OGKSBY

County: MASALIA GTON Part 1 - Driller's Log Permit #. GL 47.215 Mississipi Department of Environmental Quality Diffice of Land and Water Resources P. O. Box 2309 Diffice of Land and Water Resources P. O. Box 2309 Date drilling completed: 5.8.2013 State Law requires that this report be prepared by the license holder responsible for the work and filed with in Department at the above address within 30 days of completion of drilling of the well or borehole. Information and Well Overer (Landowner if borehole is not for a water well) Well of Derehole Location Owner Name Of LENGY FACENS PARTIVESCHIP Well of Derehole Location Mailing Address: Jaw W. L. O. Less By State Zip Code Pibe Box. 205 C. MATHAM City State Zip Code Pelbone No. Date drilling completed: S. 8: 13 Date drilling started: S. 8: 13 Date drilling completed: S. 8: 13 Method of Lat/Long (circle one): Nearest Town of C. MATNM Well / Borehole Data Date drilling started: S. 8: 13		OGKSYY		
County: \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		C14 = 4 - XX7	II Dan art	
Columbra Mississippi Department of Environmental Quality Aquifer: 12.01 Permit #, GLJ - 47215 Mississippi Department of Environmental Quality Aquifer: 12.01 Permit #, GLJ - 47215 PC, Box 2309 Jackson, MS 39225 Date drilling completed: 5.8.7213 Mississippi Department of Environmental Quality Well # State Law requires that this report be prepared by the license holder responsible for the work and filed with in Department at the above address within 30 days of completion of drilling of the well to borchole. Elog #: Department at the above address within 30 days of completion of drilling of the work and filed with in Department of Environmental Cuality. Well or Borchole Location Latinde: 32 + 05 + 08 ** LongitudE[] + 00; Mississippi Department of Environmental Cuality. Walling Address. Jarkon (L). Occres GY Mailing Address. Jarkon (MS 32523) City State Zip Code Vell / Borchole Data Distance Date drilling started: 5.8.13 Date drilling completed: 5.8.13 Date drilling started: 5.8.13 Date drilling completed: 5.8.13 Date drilling started: 5.8.14 Delectric Gamma Ray Density Sonic Neutron Other: Method of losing and volume of Chlorine used in drilling and development: Geotechonical/Geological Investigation			-	For Office Use Only:
Permit #: GLU - 472[5] Office of Land and Water Resources Driller: A., HE WCAME 0.773 Dister and and Water Resources Date drilling completed: S.B. 2013 Office of Land and Water Resources State Law requires that this report be prepared by the license holder responsible for the work and filed with the above address within 30 days of completion of drilling of the well or borehole. E.log #:	I M			Aquifer: 2 84
Driller: ₹REWCMC 0-773 Jackson, MS 39225 Date drilling completed: \$\overlag{5}\$ \$\overlag{6}\$ State Law requires that this report be prepared by the license holder responsible for the work and filed with 1 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) Owner Name OLESBY FARMS, PARTNERSHIP Mailing Address: Detwork (Landowner if borehole is not for a water well) Owner Name OLESBY FARMS, PARTNERSHIP Mailing Address: Detwork (Landowner if borehole is not for a water well) Owner Name OLESBY FARMS, PARTNERSHIP Mailing Address: Detwork (Landowner if borehole is not for a water well) Owner Name OLESBY FARMS, PARTNERSHIP Mailing Address: Detwork (Landowner if borehole is not for a water well) Owner Name OLESBY FARMS, PARTNERSHIP Mailing address: Detwork (Landowner if borehole is not for a water used for drilling: SUB (Landowner if borehole Data Date drilling started: S. 8.13 Date drilling completed: S. 8.13 Hole diameter: 2.4 ⁽¹⁾ Location of the source of any surface water used for drilling: SUB (Landowner of Chorine used in drilling: SUB (Landowner of Chorine used in drilling: SUB (Landowner of Chorine used in drilling and development: Chuce use: Two; SUB (Landowner of the source of any surface water used for drillin	47215	Office of Land and	d Water Resources	
Date drilling completed: 5 B 2013 (6011961-5228 (fax) L. S. Elevation: State Law requires that this report be prepared by the license holder responsible for the work and filed with in 30 days of completion of drilling of the well or borehole. Elever the work and filed with in 30 days of completion of drilling of the well or borehole. Information on Well Owner Well or Borehole Location Laitinde: 33 • 05 • 08 · Longitude: 1 • 06 · 0 Owner Name OGLESBY FARMS PARTWERSHIP Method of LaVLong (circle one): Conventional Survey. Mailing Address: Det Milling of the well or Borehole Location Laitinde: 33 • 05 • 08 · Longitude: 1 • 06 · 0 Mailing Address: Det Milling State State State Zip Code Method of LaVLong (circle one): Conventional Survey. USGS caad, Hand-held GPD Survey-grade GPS State Zip Code Distance Direction Nearest Town Telephone No. (VOME 0.773			
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 borchole. Information on Well Owner Well or Borchole Location (Landowner if borchole is not for a water well) Well or Borchole Location Dwner Name OctESBY FARMS PARTURENTY Well or Borchole Location Mailing Address: Jon J. Occessby Provide the state of the well of the state of the st	ted: 5.8.2013	(601)90	61- 5210	
Department at the above address within 30 days of completion of drilling of the well or borehole. Information on Well Owner Well or Borehole Location (Landowner of borehole is not for a water well) Owner Name OclESGY Figens PAETADERSHIP Mailing Address: Det ALL O. OclESGY Plo. Box 295 CuartHAM MS 38731 City Site City Site Vell / Borehole Data Date drilling completed: S. 8: 13 Date drilling and volume of Chlorine used in drilling: Site Well / Borehole Data Miles Date drilling and volume of Chlorine used in drilling: Site Vell / Borehole Data Miles Date drilling started: S. 8: 13 Location of the source of any surface water used for drilling: Site Logs run (circle all applicable) Toto for pub Seismic Survey_Other (describe) Geotechnical/Geological Investigation		. ,		
Well or Borehole Location Well or Borehole Location Well or Borehole Location Landowner if borehole is not for a water well) Owner Name OLLESGY FARMS PARTNERSHIP Mailing Address: Date Mathematic State P.O. Box 205 Custom City State City State Date drilling started: S.8.13 Dat	quires that this report be at the above address with	r prepared by the licent win 30 days of compl	nse holder responsible for t tetion of drilling of the well	the work and filed with the
Dwner Name OGLESSY FARMS PARTNERSHIP Mailing Address: Data Occessor Method of LaULong (circle one): Conventional Survey, USGS Guad, Hand-held GPB, Survey-grade GPS P.0. Box 2.05 State Zip Code Telephone No.	Information on Well Own	er	Well or Bo	orehole Location
Dwner Name OLLESGY FARMS MATHAETNERSHIP Mailing Address: Date M Date SS Date SS Date SS Date drilling started: SS SS SS SS SS SS SS SS Distance Direction Nearest Town Well / Borehole Data Date drilling started: SS SS SS SS SS SS SS No Of CHARTMAM CALESSY Distance Distance Distance Distance SS SS SS No Of CALESSY Conventional Survey, grade GPS Well / Borehole Data Date drilling started: SS SS SS Hole dameter: 24 Method of dosing and volume of Chlorine used for drilling: SS SS SS Hole dameter: 24 Method of dosing and volume of Chlorine used in drilling: SS SS Hole diameter: 24 Method of LavLong (circle one) Note: Method of LavLong (circle one) So So <t< td=""><td>ner if borehole is not for a</td><td>water well)</td><td>Latitude: 33.05.08</td><td>" Longitude: 1 .06.14</td></t<>	ner if borehole is not for a	water well)	Latitude: 33.05.08	" Longitude: 1 .06.14
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F0. $F0.$ <t< td=""><td>JOHN W. OGLES</td><td>BY</td><td></td><td></td></t<>	JOHN W. OGLES	BY		
Summer MS 38731 City State Zip Code Telephone No. (0. Box 205			
Telephone No. (5W 1/ SE 1/ Sec 17	
Well / Borehole Data Well / Borehole Data Date drilling started: 5.8.13 Date drilling completed: 5.8.13 Hole depth: 1/2 Hole diameter: 24 11 Location of the source of any surface water used for drilling: Survey_Colspan="2">Survey_Colspan="2">Survey_Colspan="2">Survey_Colspan="2">Survey_Colspan="2">Survey_Colspan="2">Survey_Colspan="2">Survey_Colspan="2">Survey_Colspan="2">Survey_Colspan="2">Other (describe) If drilling is not related to water well construction, skip the remainder of this block Purpose of Well (check one): Home IndustrialPublic Supply Irrigation Fish Culture Other: If drilling is not related to water well construction, skip the remainder of this block Purpose of Well (check one): Home IndustrialPublic Supply	y State	<u>Sð / 31</u> Zip Code	Distance Direction	
Date drilling started: 5:8:13 Date drilling completed: 5:8:13 Hole depth:)		<u> </u>	OI CARANTARY
Date drilling started: 5:8:13 Date drilling completed: 5:8:13 Hole depth:		Wall / Rarah	ole Data	
Location of the source of any surface water used for drilling: S_G_G(G, H) Method of dosing and volume of Chlorine used in drilling and development: CHLGENE TASTICTS Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:	5912	۲۰۰۱ کے ا		24"
Method of dosing and volume of Chlorine used in drilling and development: <u>CAL-2: AC TACETAC</u> TACETAC	1.3.0.1.7 Date drillin	g completed: $3 \cdot 6 \cdot 1$	> Hole depth: \\	Hole diameter: <u> </u>
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:	rce of any surface water us and volume of Chlorine us	ed for drilling: <u>Soc</u>	UCH	IETS
Name of organization running log(s): Purpose of borehole (check one): Water Well 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 Fish Culture Other: If a flowing well, method of flow regulation: Valve Other (describe) Static Water Level: feet above or below (circle one) land surface Date measured: Method of Measurement (circle one) steel tape electric tape air line other: Well depth: ID Well grouted to a depth of ID feet Type of grout (circle one): Neat Cement Bentonite Mix Casing length: 35 feet Screen diameter: ID inches Type of casing: P. V. C. Screen length: 050 inches Setting depth: From <u>Los 755</u> feet to <u>B5 · ND</u> feet Feet Type of completion (circle all applicable): Crawel packed Underreamed Telescoped Open hole Natural Developm				
Seismic Survey_Other (describe) If drilling is not related to water well construction, skip the remainder of this block Purpose of Well (check one): HomeIndustrial Public SupplyIrrigation X Fish CultureOther: If a flowing well, method of flow regulation: ValveOther (describe) Static Water Level:feet above or below (circle one) land surface Date measured: Method of Measurement (circle one) steel tape electric tape Well depth:feet Casing diameter: Method of Measurement (circle one) steel tape electric tape air line Other: Mix Casing length:		Electric Gamma Ray	Density Sonic Neutron	Other:
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Method of Measurement (circle one) steel tape electric tape air line other:	nethod of flow regulation:	Valve Otl	her (describe)	
Well depth: <u>NU</u> Well grouted to a depth of <u>D</u> feet Type of grout (circle one): Neat Cement Bentonite Mix Casing length: <u>75</u> feet Casing diameter: <u>16</u> inches Type of casing: <u>P.V.C.</u> Screen length: <u>35</u> feet Screen diameter: <u>16</u> inches Type of screen: <u>P.V.C.</u> Screen slot size: <u>050</u> inches Setting depth: From <u>65.75</u> feet to <u>85.110</u> feet Type of completion (circle all applicable): <u>travel packed</u> Underreamed Telescoped Open hole Natural Developm	feet above	or below (circle one) la	nd surface Date measured:	
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Screen slot size: $.050$ inches Setting depth: From $.45 \cdot 75$ feet to $.85 \cdot 10$ feet Type of completion (circle all applicable): cravel packed Underreamed Telescoped Open hole Natural Developm	<u>35</u> feet Screen c	iameter: 16	_inches Type of screen:	P.V.C.
	_	Setting depth: From 4	<u>e5.75</u> feet to <u>B</u>	<u>5.110</u> feet
	ı (circle all applicable)	ravel packed Underro	eamed Telescoped Open	hole Natural Development
Other (describe):	0	ther (describe):		
Top of lap pipe or reduction in casing:feet. If telescoped or more than one screen, describe on next page	eduction in casing:	feet. If tele	scoped or more than one scre	en, describe on next page
Form: OLIMP SIMP 1				Form: OLWR-SWR-1A (04
				エトクト
la l				HECE
				Form: OLWR-SWR-1A (04 RECE GUL 10 BY: OL

	RECEIVED
Mailing Address: John W. Oblesky Method o	Sector of a licensed pump installer. For Office Use Only: VEOR Office Use Only: Well #: Vell #: R& 4 Vell #: R& 4 Aquifer: Aquifer: 0
Chathan MS 38731 5W	Miles NW of Chakam
Pump Type (circle	one)
Submersible (urbine) Air Lift Centrifugal Flowing Well Jet Pisto Date Pump Installed: $5/2-2/13$ Rated Pump Is This Pump (circle one): New Repaired Replacement · Power Type (circle Electric Diesel Gasoline Natural Gas Tractor PTO Windmill Oth Horse Power Rating of Motor: 60^{44} Setting Depth: 26	o Capacity: <u>2000</u> Gallons Per Minute
Pump Test Data for Non F Date Well Tested: Duration Static Water Level (A): Feet Below Land Surface Duration Drawdown [(B) - (A)]: Feet Below Land Surface Te Method of measurement (circle one): Steel tape Electric tape Air lin Pump Test Data for Flor Measured shut in head: Image: Air line Feet	of Pump Test (<i>minimum 4 hours</i>): hours ng Water Level (B): Feet Below Land Surface st Pumping Rate: Gallons Per Minute ne Other (<i>describe</i>):
Meter Installatio	n
Meter Manufacturer: <u>McCROMETER</u> Me Meter Model Number/Name: <u>M0308</u> Ty Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, et Installation Date: <u>$6/1/13$</u> Meter installed by: <u>$C.6/c$</u> Is This Meter (<i>circle one</i>): New Repaired Replacement Important: By submitting the above information you are certifying the For agricultural wells, a list of approved meters	pe of Meter: <u>SADDLE</u> c): <u>AFX.001</u> of <u>Frrigation</u> at this meter was installed to manufacturer standards.
I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY that the above statements are true to the best of r I HEREBY CERTIFY	13 13 Signature of Pump Installer

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Form:	OLWR-SWR-1B (4/13)