County: WAYN	E
Permit #:	,
Driller: EARL M	USELEK
Date drilling completed:	10-23-13

## STATE WELL REPORT Part 1

Driller's Log
Mississippi Department of Environmental Quality
Office of Land and Water Resources P.O. Box 2309

Jackson, MS 39225-2309 (601)961-5210 (601)360-0535 (fax)

For Office Use Only:		
Well #: P79  Aquifer:		
£-Log #:		

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. Well or Borehole Location

Well Owner Information	Well or Borehole Location
(Landowner if borehole is not for a water well)	Latitude: 31.40 · 72 Ingitude: 088-29-438
Owner Name: <u>ANDREW MERRILL</u>	Method of Lat/Long (check one): Conventional Survey,
Mailing Address:	USGS quad, Hand-held GPS, Survey-grade GPS
MARTIN SUNLIGHTRE	P SW V GOL GAL
warnes Boas no 3936	AESWNEW, Sec 9 VT 8N R 6W 5W
City State Zip Code	11 Miles EAST of ungressore
Telephone No. (61) 4735 - 6807	(Distance) (Direction) (Nearest Town)
Well / R	orehole Data
Date drilling started: 10-22 Date drilling completed:	10-23-Hae depth: 90 Hole diameter: 4
bate straining started of any curface water used for drilli	ng: \$37 county Lake Der Han Ro
Location of the source of any surface water used for differ	400 HTH COLLEGE 1500 TO
Method of dosing and volume of Chlorine used in drilling a	
Logs run (circle all applicable): كان المراقعة Electric Gami	na Ray Density Sonic Neutron Other:
Name of organization running log(s):	13
Purpose of borehole (circle one): Vater Visit Geotechn	ical/Geological Investigation Ground Source Heat Pump
Seismic Survey Other	(describe)
If drilling is not related to water well c	onstruction, skip the remainder of this block
Purpose of Well (circle all applicable): Home Industrial	Public Supply Irrigation Fish Culture
Other (describe):	
If a flowing well, method of flow regulation: Valve	Other (describe)
Static Water Level: 6 feet jabove or below	v] land surface Date measured: 10-23-13
Method of measurement (circle one): Seel tape Electric	then Air line Other (describe):
·	feet Type of grout (circle one): Neat Coment Bentonite Mix
Casing length: 90 feet Casing diameter:	4 inches Type of casing:
Screen length: 10' feet Screen diameter:	4 inches Type of screen:
Screen slot size: # 10 inches Setting depth	From 80 feet to 90 feet
Type of completion (circle all applicable): Gravel packed	Underreamed Open hole Natural Patelonment VED
Other (describe):	
Top of lap pipe or reduction in casing:feet	001.0.8.288
If telescoped or more than	one screen, describe on next page

LOUBLE ANT

County: WAYNE  Permit #:			Office Use	Only:	
The sketch below only required for water wells  If well telescopes, show depths on sketch.	Description of formations enco and boreholes, unless specifica	untered i lly exemp	nust be provide nted by regulation	d for all wells	
	Description of Formations Encount	ered	From (depth)	To (depth)	
Ground Level	TOP 5021	resea	Ground level	2	
-	-	************	0		
	Brownsa			-4	
	Reosan		30	22	
	med Red 34	20	22	27	
	CH49/4		27	30	
111	Junto Ta SA		30	35	
	Finefores SA	20	35	40	
	CHURIK		40	42	
	Sang Ston	~_	42	43	
	Fire reosa		43	65	
Pump #10					
or' The speed	Mes GNITES		55	68	
80-10	mes/course			80	
Speck Back	COURSE SA	20	80	90	
12-130 H					
			<del></del>		
		1	1	ŧ,	
·					
If more than one screen, show location of each on sketch			<del></del>	<del></del>	
Sketch the property layout and include the following:  1) the well location  2) any permanent structures on the property that may aid in locating the well  3) any roads, power lines, or other items that may aid in locating the property and the well  4) north arrow  Oyeas Briogero. Rn. Rn. LT or Denthm Property  ON RT GOTO END THAN LT ON DENHAM Property  RO 1/2 mile Than LT on Palmen Hollonthers.  GO 1 mile To Marton Sunkight on LT  GO 1 TOR miles To Trapilor on RT.					
				-	
				•	
Landowner Name:				1	
I HEREBY CERTIFY that the well/borehole was drilled, correquirements of the Mississippi Department of Environme if applicable, and state laws.	nstructed, and completed in accontal Quality and the Mississippi D	ordance v Jepartme	with all applica nt of Health re	ble gulations,	
Pri. Name of Responsible Licensee and License No.	2-24-13 Earl 7	MO nature o	deleg f Licensee	The state of the s	

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

# STATE WELL REPORT

### Part 2

Pump Installer's Completion Report Mississippi Department of Environmental Quality Permit #: \_\_\_\_ Office of Land and Water Resources Driller: EARL P.O. Box 2309 Date completed: 10

County: WAYNE

Jackson, MS 39225-2309 (601)961-5210 (601) 360-0535 (fax)

For Office Use Only:		
Well #:		
Aquifer:		

Copy information from block on Part 1 This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part I of the report must be attached and both parts filed with the Department at the above address within 30 days of well completion.

of the report must be attached and both parts filed with the D	Well Location		
Well Owner Information	Latitude: 31-40-72/Longitude: 088-29-438		
Owner Name: ANOREW MERGII			
Mailing Address:	Method of Lat/Long (check one): Conventional Survey,		
MARTIN SUNLIGHT RO	USGS quad, Hand-held GPS Survey-grade GPS		
City State Zip Code			
City State Zip Code	// Miles EAST of uncessore (Distance) (Direction) (Nearest Town)		
Telephone No. (601) 735 6807	(Distance) (Direction) (Near est 1911)		
•	pe (circle one)		
Submersible Turbine Air Lift Centrifugal Flowing Well	Jet Piston Rotary Other (describe):		
Date Pump Installed: 10-29-13 Rated Pump Capacity: 19 Gallons Per Minute			
Is This Pump (circle one): Repaired Replacement			
Power Type (circle one)			
Electric Diesel Gasoline Natural Gas Tractor PTO Windmill Other (describe):			
Horse Power Rating of Motor: Setting Dep	th: 80 feet Number of Stages: 7		
Pump Test Data	for Non Flowing Well		
Date Well Tested: 10-24-13	Duration of Pump Test (minimum 4 hours): hours		
Static Water Level (A): 58 Feet Below Land Surface	Pumping Water Level (B): 73 Feet Below Land Surface		
Drawdown [(B) - (A)]: Feet Below Land Surface Test Pumping Rate: Gallons Per Minute			
Method of measurement (circle one): Steel tape Electric to	tape Air line Other (describe):		
Pump Test Da	ata for Flowing Well		
Measured shut in head:feet.			
Well. <del>ylelded</del> GPM with a drawdown of	feet afterhours of pumping		
	Installation		
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):			
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.  For agricultural wells, a list of approved meters is on the MDEQ website.			
I HEREBY CERTIFY that the above statements are true to	the best of my knowledge.		
2001 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
FARL MUSELEY 5496 Print Name of Pump Installer and License No. (If applicable)			
Trinic name of ramp measure and account to the	Form: OLWR-SWR 1B (4)13)		