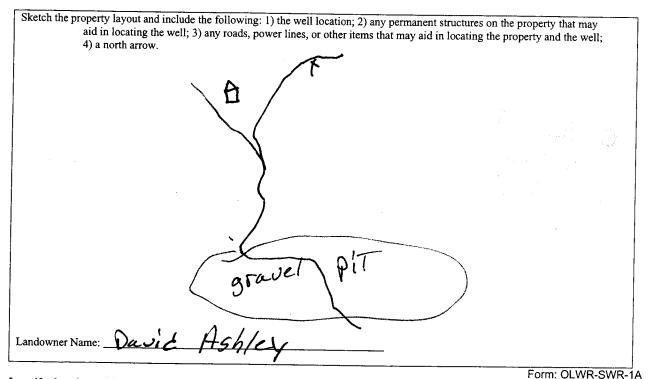
County: Jacobi Part 1 – Driller's Log For Office U Permit #:	
Permit #: Mississippi Department of Environmental Quality Driller: <u>CleT-3</u> <u>Magee</u> Date drilling completed: <u>7/26/07</u> Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 10631 Jackson, MS 39289-0631 L. S. Elevation:	44
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Date drilling completed: 7/26/07 (601)961-5210	
Date drilling completed: $(001)501-5210$ (601)354-6938 (fax) E-log #:	
Department at the above address within 30 days of completion of drilling of the well or borehole. Information on Well Owner Matter Well) Charles Contended is not for a water well Charles Contended is not for the charles C	li 59 urvey, GPS
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The sketch below only required for water wells

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			
If well telescopes, show depths on sketch. Ground Level				
	<u> </u>	From (depth)	To (depth)	
	Clary	Ground Level	33	
	gravel		50	
	clar	50	123	
	SUL	123	192	
	Clark	1 , 2 2	145	
	Eliz SITI C. I		143_	
	The All & Stands	143	-175-	
	- Crav	+ 175 =	-225	
	The Gund	- 225	220	
	Cla	230	275	
	Fine sunc	275	200	
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I I I I I I I I I I I I I I I I I I I				

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. Print Name of Responsible Licensee and License No. Date

Signature of License