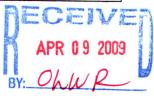
5 J -4	State W	ell Report	
110100		-	For Office Use Only:
County: Japan	Part 1 Mississippi Department of Environmental Quality		Aquifer:
Permit#:	Office of Land and Water Resources		V 00
Driller MBus CRESSWEIL	P.O. Box 10631		Well #:
I I AI	Jackson, MS 39289-0631		L. S. Elevation:
Date drilling completed: $4 - 1 - 69$		961-5210	
	(001)354	4-6938 (fax)	E-log #:
State Law requires that this rep 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 Information		W.C. Well	Location NC
Owner Name BRET ROBIN	SOAL	Latitude	
	/	22 44 30	" Longitude: 12 "
Mailing Address: 370 DAK VAILEY RD		Method of Lat/Long (circle one): Conventional Survey,	
		USGS quad, Hand-held	GPS, Survey-grade GPS
Azoo City Ms. 39194 City State Zip Code		1/4 Seaf Twn 3-W Rng/1-N	
		Distance Direction	Nearest Town
Telephone No. 662, 746- 9	104	Distance Direction <u>5</u> Miles $5 - 1/2$	of 4 0100 City
		Data	1 1
			11
Purpose of Well (circle one) Home Ind			Other: Test
Date well drilling started: $3 - 24_0$	Date v	vell drilling completed: <u>H</u> -	1-09
If flowing, method of flow regulation: Val	ve Other (de	escribe)	
Static Water Level:feet ab	ove or below (circle one) la	and surface Date measured:_	
Method of Measurement (circle one) st	eel tape electric tape	air line other:	· · · ·
Hole depth: 400 Well dep	pth:	Well grouted to a depth of	feet
Type of grout (circle one): Cement			
Casing length:feet Casin	ng diameter:	inches Type of casing:	
Screen length:feet Scre	en diameter:	inches Type of screen:	
Screen slot size:inches	Setting depth: From	feet to	feet
Type of completion (circle all applicable):	Gravel packed Underr	eamed Telescoped Open l	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):	ulled hale	-400 sealed	-bentonite
Department of Environmental Quality and	ico or the mississippi Depa	artment of Health regulations	and state laws.
ERNEST M. CRESS	WEI 0-1.	50 Elnerth.	(unicel)
Print Name of Water Well Contractor and I			Water Well Contractor

*



If well telescopes please sketch below and show depths.

Ground Level

	Description of Formations Encountered	From	To
1	surface dell	0	40
	sond	40	98
	yongo Clou	98	150
	and shall	150	200
	+ sanda	200	260
	Asoy shale	260	Bio
	sand F	850	400
		_	Ĺ
		_	
		- 	
	· · · · · · · · · · · · · · · · · · ·		
			1
			1
	1	1	1

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 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) indicate direction.

ROBINSON Landowner Name:

ell

Signature of Water Well Contractor

