## **RESTRICTED DRILLER'S LICENSE**

Application Form

		Date of Birth	
Address			
		Zip Code	
Telephone Number			
Email			
2. BUSINESS: Company Nar	ne		
Address			
City			_
Telephone Number			
Email			
3. EXPERIENCE RECORD:			
(a) Have you ever been denie	d a driller/contracto	r license or had a driller/cou	atractor license revoked
cancelled, or suspended by a			
		10	
If you checked ves provide	the details in Rior	K 6 ADDITONAL INFORM	ATION / COMMENTS
		ck 6 ADDITONAL INFORM	
If you checked yes, provide including the date and reaso			
including the date and reaso	on the action was	taken, and the state in wh	ich the action was taken.
<ul><li>(b) How many years of experi-</li></ul>	on the action was ence do you have i	taken, and the state in wh	ich the action was taken.
including the date and reaso	on the action was ence do you have i	taken, and the state in wh	ich the action was taken.
<ul><li>(b) How many years of experi-</li></ul>	on the action was ence do you have i	<b>taken, and the state in wh</b> n drilling, where you were a	ich the action was taken. ctually responsible for
<ul><li>including the date and reasonable</li><li>(b) How many years of experisoperating the drilling rig?</li></ul>	on the action was ence do you have i	<b>taken, and the state in wh</b> n drilling, where you were a	ich the action was taken. ctually responsible for
<ul><li>including the date and reasonable</li><li>(b) How many years of experisoperating the drilling rig?</li></ul>	on the action was ence do you have in	taken, and the state in wh n drilling, where you were a ast five (5) years?	ich the action was taken. ctually responsible for
<ul> <li>including the date and rease</li> <li>(b) How many years of experior</li> <li>operating the drilling rig?</li> <li>(c) How many boreholes have</li> </ul>	on the action was ence do you have in you drilled in the p 3.(c), how many we	taken, and the state in wh n drilling, where you were a ast five (5) years?	ich the action was taken. ctually responsible for
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including the date and rease (b) How many years of experi- operating the drilling rig? (c) How many boreholes have (d) Of the number included in Geotech Boreholes (e) What was the depth of the	on the action was ence do you have in e you drilled in the p 3.(c), how many we Other (spec deepest well/boreh he largest well/bore	taken, and the state in wh n drilling, where you were a east five (5) years? ere: Monitor wells ify purpose) nole you have drilled?	ich the action was taken. ctually responsible for  Seismic Holes

**4. REFERENCES:** Provide the names and contact information for three industry professionals or other individuals who have supervised your work and/or have firsthand knowledge of your qualifications and experience as a driller/contractor.

Name	Occupation
Address	Telephone No
City	State Zip Code
Name	Occupation
Address	Telephone No
City	State Zip Code
Name	Occupation
Address	Telephone No
City	State Zip Code

5. DESCRIPTION OF DRILLING EQUIPMENT YOU WILL USE, IF YOU ARE LICENSED: (a) Drill Rig: Make and Model \_\_\_\_\_\_

(b) Water Tank Truck: Make and Model \_\_\_\_\_

(c) If the above listed equipment is owned by someone other than yourself, provide the name, telephone number, and address of the owner:

(d) If the equipment you plan to use is not commercially manufactured, attach a detailed description and photograph of the equipment.

(If this application is approved, applicant must also submit drill rig registration form within ten
days after license is issued.)
Maximum Capability (depth in feet)

## 6. ADDITIONAL INFORMATION / COMMENTS:

7. I hereby certify, under penalty of revoca	tion of any license issued pursuant to this application, that the					
information I have provided in this application is true and correct, to the best of my knowledge. I further grant my references authority to provide information regarding my experience and qualifications as a well driller to the Mississippi Department of Environmental Quality in support of this application.						
Signature of Applicant	Printed Name					
NOTARY:						
STATE OF, COUN						
	personally came and appeared before the undersigned					
authority in and for the aforesaid jurisdiction						
SVUCKIN TO AND SUDSCRIDED DEFORE ME ON I	this the day of, 20					
My Commission expires:						
- · ·						

NOTARY PUBLIC