

**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  
 (601)961-5210  
 (601)961-5228 (fax)

County: Amite  
 Permit #: \_\_\_\_\_  
 Driller: Fitzgerald Well Service  
 Date drilling completed: 7-14-11

For Office Use Only:  
 Aquifer: B 69  
 Well #: \_\_\_\_\_  
 L. S. Elevation: \_\_\_\_\_  
 E-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.*

Information on Well Owner  
 (Landowner if borehole is not for a water well)  
 Owner Name: Tasen Danaway  
 Mailing Address: Dace Ln.  
Buxton  
 City State Zip Code \_\_\_\_\_  
 Telephone No. ( ) \_\_\_\_\_

Well or Borehole Location  
 Latitude: 31° 17' 22.6" Longitude: 90° 51' 15.9"  
 Method of Lat/Long (circle one): 23 Conventional Survey, 16 USGS quad, Hand-held GPS, Survey-grade GPS  
NE 1/4 1/4 Sec 25 Twn 4N Rng 3E  
 Distance \_\_\_\_\_ Direction \_\_\_\_\_ Nearest Town \_\_\_\_\_  
 Miles \_\_\_\_\_ of \_\_\_\_\_

Well / Borehole Data  
 Date drilling started: 7-14-11 Date drilling completed: 7-14-11 Hole depth: 152' Hole diameter: 8"  
 Location of the source of any surface water used for drilling: \_\_\_\_\_  
 Method of dosing and volume of Chlorine used in drilling and development: \_\_\_\_\_  
 Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: \_\_\_\_\_  
 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: 94' feet above or below (circle one) land surface Date measured: 7-14-11  
 Method of Measurement (circle one)  steel tape \_\_\_\_\_ electric tape \_\_\_\_\_ air line \_\_\_\_\_ other: \_\_\_\_\_  
 Well depth: 152' Well grouted to a depth of 10' feet Type of grout (circle one):  Neaf Cement  Bentonite  Mix  
 Casing length: 132' feet Casing diameter: 4" inches Type of casing: Pvc  
 Screen length: 20' feet Screen diameter: 4" inches Type of screen: Pvc  
 Screen slot size: .010 inches Setting depth: From 132' feet to 142' feet  
 Type of completion (circle all applicable):  Gravel packed \_\_\_\_\_ Underreamed \_\_\_\_\_ Telescoped \_\_\_\_\_ Open hole \_\_\_\_\_ Natural Development \_\_\_\_\_  
 Other (describe): \_\_\_\_\_

Top of lap pipe or reduction in casing: \_\_\_\_\_ feet. *If telescoped or more than one screen, describe on next page.*  
 Form: OLWR-SWR-1A (04/08)

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JUL 22 2011

BY: OLWR



# STATE WELL REPORT

County: Amite  
 Permit #: \_\_\_\_\_  
 Driller: Fitzgerald Well Serv  
 Date completed: 7-14-11  
Copy information from block on Part 1

**Part 2**  
**Pump Installer's Completion Report**  
 Mississippi Department of Environmental Quality  
 Office of Land and Water Resources  
 P.O. Box 2309  
 Jackson, MS 39225  
 (601)961-5210  
 (601)961-5228 (fax)

**For Office Use Only:**  
 Aquifer: \_\_\_\_\_  
 Well #: \_\_\_\_\_  
 Elevation: \_\_\_\_\_

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

**Well Owner Information**  
 Owner Name: Talon Dunaway  
 Mailing Address: Duce Ln,  
Busy Corner,  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Telephone No. ( ) \_\_\_\_\_

**Well Location**  
 Latitude: 31° 17' 22.6" Longitude: 90° 51' 15.8"  
 Method of Lat/Long (check one): Conventional Survey \_\_\_\_\_  
 USGS quad \_\_\_\_\_, Hand-held GPS \_\_\_\_\_, Survey-grade GPS \_\_\_\_\_  
 \_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4 Sec. 25 T. YN R. 3E  
 Distance \_\_\_\_\_ Direction \_\_\_\_\_ Nearest Town \_\_\_\_\_  
 \_\_\_\_\_ Miles \_\_\_\_\_ of \_\_\_\_\_

**Pump Type**  
 Circle one  
 Jet   Submersible  
 Piston  Turbine  
 Rotary  Flowing Well  
 Other (specify): \_\_\_\_\_  
 Date Pump Installed: 7-14-11  
 Rated Pump Capacity: 12 Gallons Per Minute

**Power Type**  
 Circle one  
 Diesel Engine \_\_\_\_\_ Natural Gas \_\_\_\_\_  
 Electric Motor  Gasoline Engine \_\_\_\_\_ Tractor PTO \_\_\_\_\_  
 Windmill \_\_\_\_\_ Hand \_\_\_\_\_ Other (specify): \_\_\_\_\_  
 Horse Power Rating of Motor: 3/4  
 Setting Depth: 150' feet  
 Number of Stages: 12

**Pump Test Data**  
 Date Well Tested: \_\_\_\_\_  
 Static Water Level (A): \_\_\_\_\_ Feet Below Land Surface  
 Pumping Water Level (B): \_\_\_\_\_ Feet Below Land Surface  
 Drawdown [(B) - (A)]: \_\_\_\_\_ Feet Below Land Surface  
 Test Pumping Rate: \_\_\_\_\_ Gallons Per Minute  
 Duration of Pump Test (minimum 4 hours): \_\_\_\_\_ hours

**Method of Measuring Water Level**  
 Circle one  
 Air Line \_\_\_\_\_ Electric Measuring Line  Steel Tape \_\_\_\_\_  
 Other (specify): \_\_\_\_\_  
 For flowing well, measured shut in head: \_\_\_\_\_ feet  
 Well yielded \_\_\_\_\_ GPM with a drawdown of \_\_\_\_\_  
 \_\_\_\_\_ feet after \_\_\_\_\_ hours of pumping

This is for (circle one):  New Well  Replacement of Existing Pump  Repair of Existing Pump

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.  
Brad Fitzgerald 009  
 Print Name of Pump Installer and License No. (if applicable)  
Paul Strick  
 Signature of Pump Installer  
 Form: OLWR-SWR-1C (7/09) **RECEIVED**

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

LAND ACQUISITION REPORT (Form No. 1042)

<p>Project Name: _____</p> <p>Location: _____</p> <p>Section: _____</p> <p>Range: _____</p> <p>Township: _____</p> <p>County: _____</p> <p>State: _____</p>	<p>Acres: _____</p> <p>Section: _____</p> <p>Range: _____</p> <p>Township: _____</p> <p>County: _____</p> <p>State: _____</p>
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<p>Acres: _____</p> <p>Section: _____</p> <p>Range: _____</p> <p>Township: _____</p> <p>County: _____</p> <p>State: _____</p>	<p>UNITED STATES DEPARTMENT OF THE INTERIOR</p> <p>BUREAU OF LAND MANAGEMENT</p> <p>OFFICE OF LAND ACQUISITION</p> <p>WASHINGTON, D. C. 20240</p>	<p>Acres: _____</p> <p>Section: _____</p> <p>Range: _____</p> <p>Township: _____</p> <p>County: _____</p> <p>State: _____</p>
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