

Form: OLWR-SWR-1A

Well / Borehole Data

Date drilling started: 11-3-08
 Date drilling completed: 11-3-08
 Hole depth: 100
 Hole diameter: 8"

Location of the source of any surface water used for drilling and development:
 Method of dosing and volume of Chlorine used in drilling and development:
 Logs run (circle all applicable): No logs Electric Gamma Ray Density Sonic Neutron Other:
 Name of organization running logs:
 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: Cattle Farm

If a flowing well, method of flow regulation: Valve Other (describe):
 Static Water Level: 67 feet above or below (circle one) land surface Date measured: 11-3-08
 Method of Measurement (circle one): steel tape electric tape air line other:
 Well depth: 100 feet
 Well grouted to a depth of 10 feet
 Type of grout (circle one): Neat Cement Bentonite Mix
 Casing length: 80 feet
 Casing diameter: 4 inches
 Type of casing: PVC
 Screen length: 20 feet
 Screen diameter: 4 inches
 Type of screen: PVC
 Screen slot size: 0.10/0.2 inches
 Setting depth: From 80 feet to 100 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

Information on Well Owner
 (Landowner if borehole is not for a water well)

Owner Name: John Newman
 Mailing Address: Park Rd
 City: Liberty MS
 State: MS
 Zip Code: _____
 Telephone No. () _____

Well or Borehole Location

Latitude: 30° 13' 56" N
 Longitude: 90° 41' 38.8" W
 Method of Lat/Long (circle one): Conventional Survey; USGS quad, Hand-held GPS, Survey-grade GPS
 Distance _____ Miles
 Direction _____ of _____
 Nearest Town _____
 Town _____ Sec _____
 Range _____

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.

For Office Use Only:

Acquirer: J-73
 Well #: _____
 L. S. Elevation: _____
 E-log #: _____

State Well Report
 Part 1 - Driller's Log
 Mississippi Department of Environmental Quality
 Office of Land and Water Resources
 P.O. Box 10631
 Jackson, MS 39289-0631
 (601)961-5210
 (601)354-6938 (fax)

County: Amite
 Permit #: _____
 Driller: Fitzgerald Well Service
 Date drilling completed: 11-3-08

Form: OLWR-SWR-1B

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

Print Name of Pump Installer and License No. (if applicable): Brad Fitzgerald

Signature of Pump Installer: Brad Fitzgerald

<p>Pump Test Data</p> <p>Date Well Tested: _____</p> <p>Static Water Level (A): _____ Feet Below Land Surface</p> <p>Pumping Water Level (B): _____ Feet Below Land Surface</p> <p>Drawdown (B) - (A): _____ Feet Below Land Surface</p> <p>Test Pumping Rate: _____ Gallons Per Minute</p> <p>Duration of Pump Test (minimum 4 hours): _____ hours</p>	<p>Method of Measuring Water Level</p> <p>Air Line _____</p> <p>Electric Measuring Line _____</p> <p>Circle one: <u>Steel Tape</u></p> <p>Other (specify): _____</p> <p>For flowing well, measured shut in head: _____ feet</p> <p>Well yielded _____ GPM with a drawdown of _____ feet</p> <p>_____ feet after _____ hours of pumping</p>
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<p>Pump Type</p> <p>Circle one</p> <p>Air Lift _____</p> <p>Jet _____</p> <p>Submersible _____</p> <p>Bucket _____</p> <p>Piston _____</p> <p>Turbine _____</p> <p>Flowing Well _____</p> <p>Centrifugal _____</p> <p>Other (specify): _____</p> <p>Date Pump Installed: <u>11-3-08</u></p> <p>Rated Pump Capacity: <u>20</u> Gallons Per Minute</p>	<p>Power Type</p> <p>Circle one</p> <p>Diesel Engine _____</p> <p>Gasoline Engine _____</p> <p>Natural Gas _____</p> <p>Electric Motor _____</p> <p>Hand _____</p> <p>Tractor PTO _____</p> <p>Windmill _____</p> <p>Other (specify): _____</p> <p>Horse Power Rating of Motor: <u>1</u></p> <p>Setting Depth: <u>95</u> feet</p> <p>Number of Stages: <u>8</u></p>
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<p>Well Owner Information</p> <p>Owner Name: <u>John Newman</u></p> <p>Mailing Address: <u>Patker Rd</u></p> <p>City: <u>Liberty</u> State: <u>MS</u></p> <p>Zip Code: _____</p> <p>Telephone No. () _____</p>	<p>Well Location</p> <p>Latitude: <u>31° 13' 56.4"</u> Longitude: <u>90° 41' 38.8"</u></p> <p>Method of Lat/Long (check one): <input type="checkbox"/> Conventional Survey, <input type="checkbox"/> USGS quad, <input type="checkbox"/> Hand-held GPS, <input type="checkbox"/> Survey-grade GPS</p> <p>Distance _____ Miles</p> <p>Direction _____</p> <p>Nearest Town _____</p>
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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.

For Office Use Only:

Aquifer: _____

Well #: J-73

Elevation: _____

STATE WELL REPORT

Part 2

Pump Installer's Completion Report

Mississippi Department of Environmental Quality

Office of Land and Water Resources

P.O. Box 10631

Jackson, MS 39289-0631

(601)961-5210

(601)354-6938 (fax)

County: Amite

Permit #: _____

Driller: Fitzgerald Wellbore

Date completed: 11-3-08

Copy information from block on Part I