

County: Amite  
 Permit #: 0-586  
 Driller: JAMES WELLS  
 Date drilling completed: 2-17-10

**State Well Report**  
**Part I - 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)

U-104  
 For Office Use Only:  
 Aquifer: U104  
 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 <i>(Landowner if borehole is not for a water well)</i>	Well or Borehole Location
Owner Name: <u>Mary Taylor</u>	Latitude: <u>31° 03' 12"</u> Longitude: <u>90° 33' 22"</u>
Mailing Address: <u>1945 Brattan Rd</u> <u>O sayka Miss</u> <u>39657</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
City: _____ State: _____ Zip Code: _____	<u>SW</u> ¼ <u>NE</u> ¼ Sec <u>13</u> Twn <u>1n</u> Rng <u>6E</u>
Telephone No. ( <u>601</u> ) <u>810 9899</u>	Distance _____ Miles _____ Direction <u>north</u> of Nearest Town <u>Sayka</u>

**Well / Borehole Data**

Date drilling started: 2-17-10 Date drilling completed: 2-17-10 Hole depth: 130 Hole diameter: 7

Location of the source of any surface water used for drilling: creek water  
 Method of dosing and volume of Chlorine used in drilling and development: 3 lb shock

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: 70 ~~feet~~ feet above or below (circle one) land surface Date measured: 2-17-10

Method of Measurement (circle one) steel tape electric tape air line other: \_\_\_\_\_

Well depth: 130 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 110 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 20 feet Screen diameter: 4 inches Type of screen: PVC

Screen slot size: .008 inches Setting depth: From 110 feet to 130 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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**MAR 11 2010**  
**BY: OLWR**

BY: OLWP

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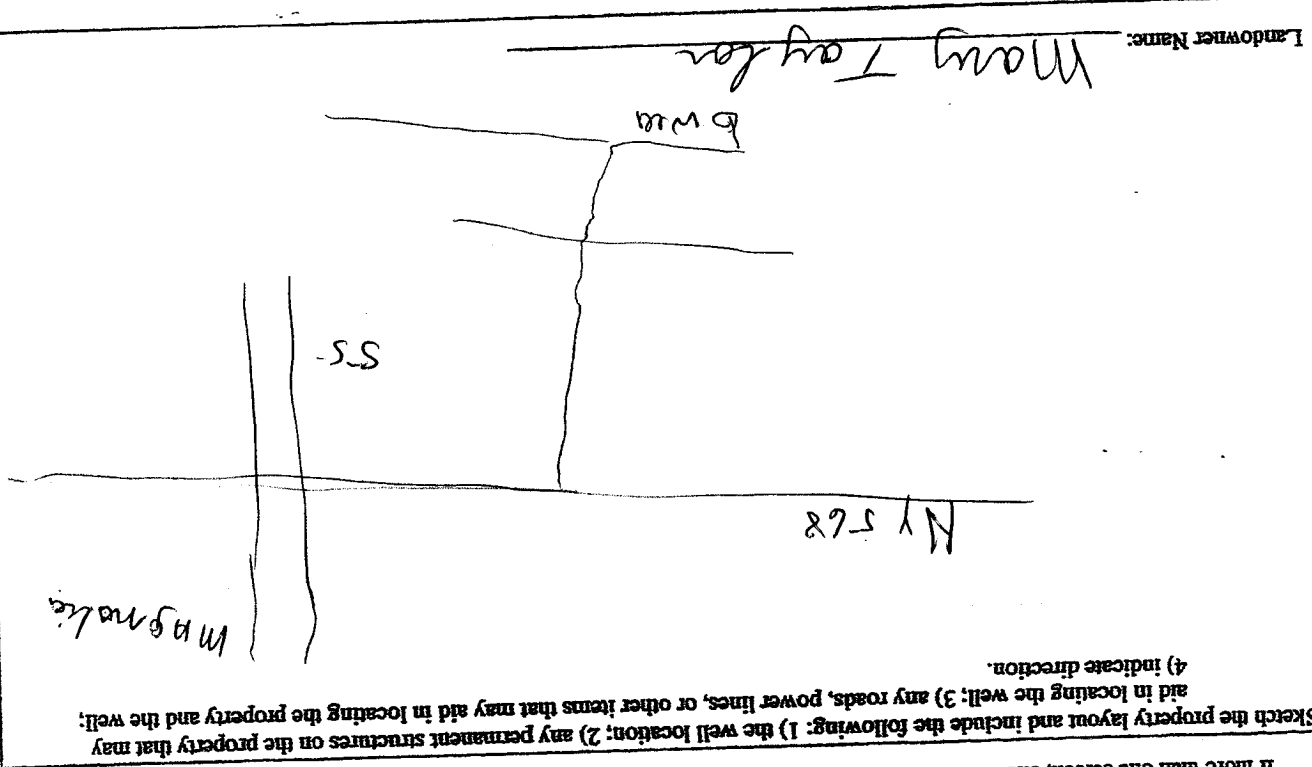
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Signature of Water Well Contractor

James Wells

Landowner Name:

Mary Taylor



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.

If more than one screen, show location of each on sketch

Ground Level

If well telescopes please sketch below and show depths.

From	To	Description of Formations Encountered
5	20	Clay
20	130	Red sand

U 104

# 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 #: 0586  
 Driller: JAMES WELLS  
 Date completed: 2-17-10

For Office Use Only:  
 Aquifer: U 104  
 Well #: \_\_\_\_\_  
 Elevation: \_\_\_\_\_

This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump.

### Well Owner Information

Owner Name: Mary Taylor  
 Mailing Address: 1945 Bralston Rd  
O-syka MS  
39657  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Telephone No. (601) 810-9899

### Well Location

Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_  
 Method of Lat/Long (circle one): Conventional Survey,  
USGS quad, Hand-held GPS, Survey-grade GPS.  
 \_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4 Sec 13 Twn 14 Rng 6E  
 Distance \_\_\_\_\_ Direction \_\_\_\_\_ Nearest Town \_\_\_\_\_  
 \_\_\_\_\_ Miles W of Clayka

### Pump Type

Circle one  
 Air Lift \_\_\_\_\_ Jet Submersible  
 Bucket \_\_\_\_\_ Piston \_\_\_\_\_ Turbine \_\_\_\_\_  
 Centrifugal \_\_\_\_\_ Rotary \_\_\_\_\_ Flowing Well \_\_\_\_\_  
 Other (specify): \_\_\_\_\_  
 Date Pump Installed: 2-17-10  
 Rated Pump Capacity: 15 Gallons Per Minute

### Power Type

Circle one  
 Diesel Engine \_\_\_\_\_ Gasoline Engine \_\_\_\_\_ Natural Gas \_\_\_\_\_  
 Electric Motor Hand \_\_\_\_\_ Tractor PTO \_\_\_\_\_  
 Windmill \_\_\_\_\_ Other (specify): \_\_\_\_\_  
 Horse Power Rating of Motor: 1 \_\_\_\_\_  
 Setting Depth: 100 \_\_\_\_\_ feet  
 Number of Stages: 14 \_\_\_\_\_

### Pump Test Data

Date Well Tested: 2-17-10  
 Static Water Level (A): 70 Feet Below Land Surface  
 Pumping Water Level (B): 100 Feet Below Land Surface  
 Drawdown [(B) - (A)]: 30 Feet Below Land Surface  
 Test Pumping Rate: 15 Gallons Per Minute  
 Duration of Pump Test (minimum 4 hours): 4 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 \_\_\_\_\_ 15 GPM with a drawdown of  
70 feet after 4 hours of pumping

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

JAMES WELLS 0-586  
 Print Name of Pump Installer and License No. (if applicable)

James Wells  
 Signature of Pump Installer

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MAR 11 2010

BY: OLWR