

State Well Report Part I - 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: Benton
Permit #: 565-
Driller: Wilson Well Co.
Date drilling completed: 11-1-12

For Office Use Only:
Aquifer: _____
Well #: J24
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)	Well or Borehole Location
Owner Name: <u>SCOTT HOLLOWAY</u>	Latitude: <u>34° 50' 41"</u> Longitude: <u>89° 02' 31"</u>
Mailing Address: <u>9043 Hwy 890</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
<u>Asheboro</u> <u>MS</u> <u>38603</u>	SW 1/4 SE 1/4 Sec <u>8</u> Twn <u>11</u> Rng <u>3E</u>
City State Zip Code	Distance <u>9 1/2</u> Miles Direction <u>EAST</u> of Nearest Town <u>ASHEBORO</u>
Telephone No. <u>(901) 335-0700</u>	

Well / Borehole Data

Date drilling started: 10-31-12 Date drilling completed: 11-1-12 Hole depth: 420' Hole diameter: 4"

Location of the source of any surface water used for drilling: PUBLIC SUPPLY
Method of dosing and volume of Chlorine used in drilling and development: 50 PPM - DIRECT

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: 130 feet above or below (circle one) land surface Date measured: 11-1-12

Method of Measurement (circle one) steel tape electric tape air line other: PVC PIPE

Well depth: 420' Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 400 feet Casing diameter: 4 inches Type of casing: PVC

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

Screen slot size: .013 inches Setting depth: From 400 feet to 420 feet

Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development
Other (describe): _____

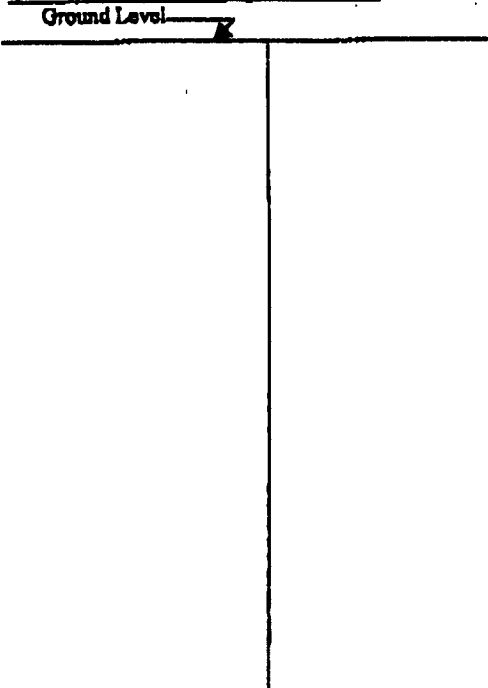
Top of lap pipe or reduction in casing: NA feet. *If telescoped or more than one screen, describe on next page*

J24

The sketch below only required for water wells

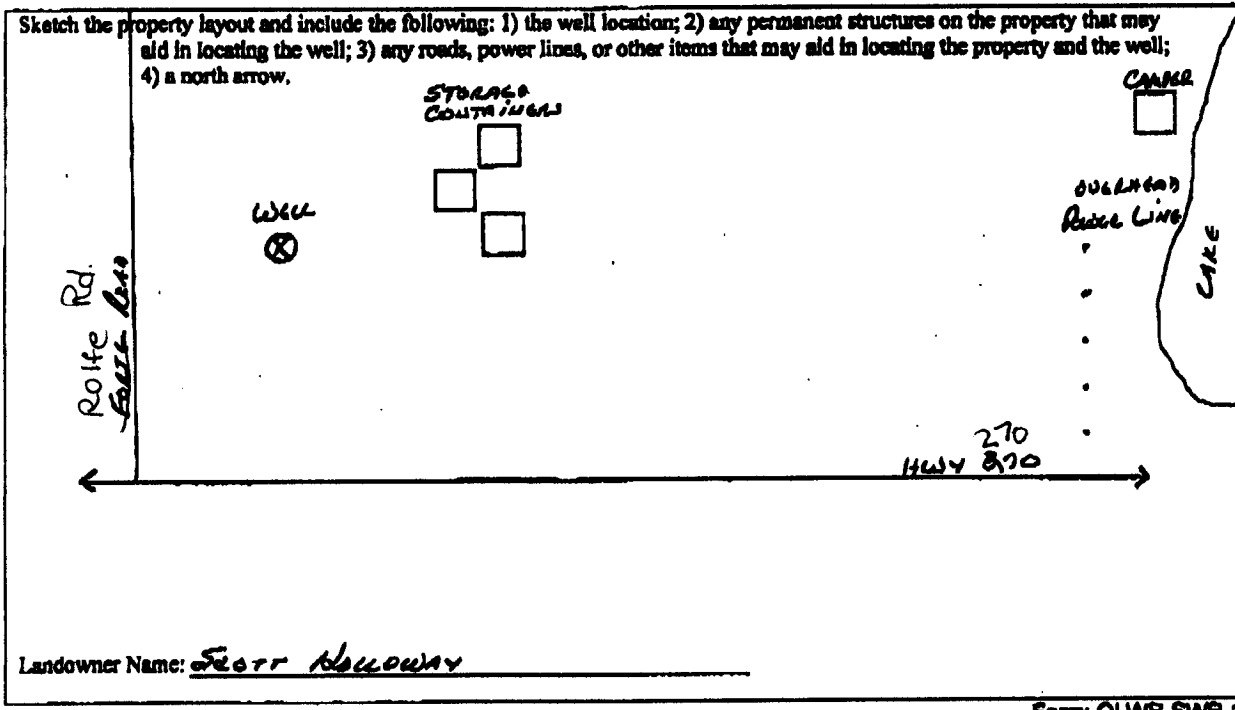
Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

If well telephones, show depths on sketch



Description of Formations Encountered	From (depth)	To (depth)
RED CLAY	Ground Level	15
RED SAND	15	20
SAND / CLAY	20	40
BLUE CLAY	40	60
CLAY / ROCK	60	80
CLAY	80	100
CLAY	100	350
SAND / ROCK	350	400
BROWN SAND	400	420

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



Form: OLWR-SWR-1A

I certify that the well/borehole was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state laws.

Rodney D. Wilson 0-418 11/26/12 Rodney D. Wilson
 Print Name of Responsible Licensee and License No. Date Signature of Licensee

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: Benton
 Permit #: 565
 Driller: Wilson Well Co.
 Date completed: 11-1-12
Copy Information from Back on P.W.1

For Office Use Only:
 Aquifer: _____
 Well #: J24
 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	Well Location
Owner Name: <u>Scott Holloway</u>	Latitude: _____ Longitude: _____
Mailing Address: <u>9043 HWY 370</u>	Method of Lat/Long (check one): Conventional Survey _____
<u>Ashlawn, Ms 38603</u>	USGS quad _____ Hand-held GPS _____ Survey-grade GPS _____
City State Zip Code	<u>SW 1/4 Sec 31 T 33 S R 2E 2E</u>
Telephone No. <u>(901) 335-6700</u>	Distance Direction Nearest Town
	<u>9 1/2 Miles EAST of ASHLAWN</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet <input checked="" type="radio"/> <u>Submersible</u>	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston Turbine	<input checked="" type="radio"/> <u>Electric Motor</u> Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>1 HP</u>
Date Pump Installed: <u>11-8-12</u>	Setting Depth: <u>160</u> feet
Rated Pump Capacity: <u>12-14</u> Gallons Per Minute	Number of Stages: <u>14</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>11-5-12</u>	Air Line Electric Measuring Line Steel Tape
Static Water Level (A): <u>130</u> Feet Below Land Surface	Other (specify): <u>PVC Plastic Pipe</u>
Pumping Water Level (B): <u>160</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>30</u> Feet Below Land Surface	Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping
Test Pumping Rate: <u>12-14</u> Gallons Per Minute	
Duration of Pump Test (minimum 4 hours): _____ hours	

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

Rodney D. Wilson 0-418
 Print Name of Pump Installer and License No. (if applicable)

Rodney D. Wilson
 Signature of Pump Installer