

**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: Bolivar  
Permit #: GW-46784  
Driller: Joel Jumper  
Date drilling completed: 3-15-13

**For Office Use Only:**

Aquifer: \_\_\_\_\_  
Well #: C183  
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>Hamp Bass</u>	Latitude: <u>33° 56' 41"</u> Longitude: <u>90° 53' 45"</u>
Mailing Address: <u>138 Ridgecrest Lane</u>	Method of Lat/Long (circle one): Conventional Survey, <u>Hand-held GPS</u> , Survey-grade GPS
<u>Clarksdale Ms 38614</u>	USGS quad: <u>NE 1/4 SW 1/4 Sec 11 Twn 24 N Rng 07 W</u>
City State Zip Code	Distance <u>2</u> Miles Direction <u>SE</u> of Nearest Town <u>Deason</u>
Telephone No. ( ) _____	

**Well / Borehole Data**

Date drilling started: 3-15-13 Date drilling completed: 3-15-13 Hole depth: 120 Hole diameter: 28 in

Location of the source of any surface water used for drilling: Nearest well

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: 17 feet above or below (circle one) land surface Date measured: 3-15-13

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

Well depth: 120 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 80 feet Casing diameter: 16 inches Type of casing: PVC

Screen length: 40 feet Screen diameter: 16 inches Type of screen: PVC

Screen slot size: .50 inches Setting depth: From 80 feet to 78 <sup>120</sup> 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-SW **RECEIVED**

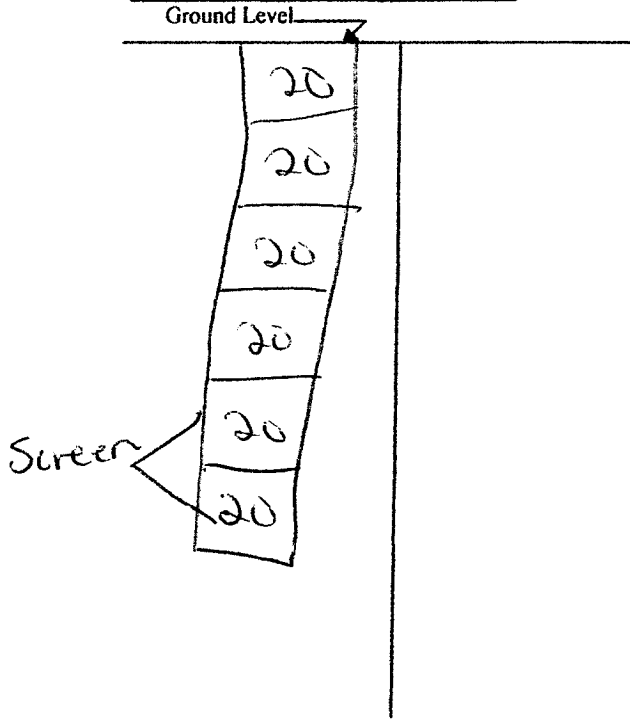
MAR 25 2013

BY: OLWR

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 telescopes, show depths on sketch.



Description of Formations Encountered	From (depth)	To (depth)
Clay	Ground Level	20
Clay	20	40
sand	40	60
Sand	60	80
gravel + sand	80	100
gravel + sand	100	120

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

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) a north arrow.

A hand-drawn sketch of a property layout. It shows two roads: "Hwy 1" and "Hwy 32". "Hwy 1" runs from the bottom left towards the top right. "Hwy 32" branches off from "Hwy 1" and runs towards the right. A well location is marked with a dot and labeled "Xwell". Other labels include "Carmison" at the bottom left, "Deeson" at the top, and a north arrow pointing upwards.

Landowner Name: Hamp Bass

Form: OLWR-SWR-1A (04/08)

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.

Joel Jumper 5317      3-15-13      Joel Jumper  
 Print Name of Responsible Licensee and License No.      Date      Signature of Licensee

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# STATE WELL REPORT

## 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 #: 0183  
 Elevation: \_\_\_\_\_

County: BOLIVAR  
 Permit #: GW-46784  
 Driller: JOEL JUMAR  
 Date completed: 3-15-13  
 Copy information from block on Part 1

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>BRUSHY LAKE FARMS</u>	Latitude: <u>33° 56' 41.1"</u> Longitude: <u>90° 53' 45.1"</u>
Mailing Address: <u>128 RIDGECREST LAKE</u>	Method of Lat/Long (check one): Conventional Survey _____
<u>CLARESBORO, MS 39614</u>	USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
City State Zip Code	<u>NE 1/4 SW 1/4 Sec 11 T 24 N R 7 W</u>
Telephone No. <u>(602) 627-7827</u>	Distance Direction Nearest Town
	<u>2 Miles SE of DEFSO</u>

Pump Type	Power Type
Circle one	Circle one
Air Lift Jet Submersible	<u>Diesel Engine</u> Gasoline Engine Natural Gas
Bucket Piston <u>Turbine</u>	Electric Motor Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>80</u>
Date Pump Installed: <u>3-16-13</u>	Setting Depth: <u>70</u> feet
Rated Pump Capacity: <u>3000</u> Gallons Per Minute	Number of Stages: <u>1</u>

Pump Test Data	Method of Measuring Water Level
Circle one	Circle one
Date Well Tested: _____	Air Line Electric Measuring Line <u>Steel Tape</u>
Static Water Level (A): <u>17</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): _____ Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: _____ Feet Below Land Surface	Well yielded _____ GPM with a drawdown of
Test Pumping Rate: _____ Gallons Per Minute	_____ feet after _____ hours of pumping
Duration of Pump Test (minimum 4 hours): _____ hours	

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.

DAVID P. HOLT C-752P Signature of Pump Installer

BY: [Signature] OLWR

Form: OLWR-SWR-1C (07-09)

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