

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 39225-2309
(601)961-5210
(601)360-0535 (fax)

For Office Use Only:

Well #: D 213
Aquifer:
E-Log #:

County: BOLIVAR
Permit #: GW-50031 ✓
Driller: Chad Mattox
Date drilling completed: 8/29/17

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.

Well Owner Information (Landowner if borehole is not for a water well)
Owner Name: Rives Neblett
Mailing Address: PO Box 26
Shelby MS 38774
City State Zip Code
Well or Borehole Location
Latitude: 33 57 52 N Longitude: 90 47 48 W
Method of Lat/Long (check one): Conventional Survey
USGS quad, Hand-held GPS, Survey-grade GPS
NW 1/4 SW 1/4, Sec 02 T 24N R 06W
2 Miles NW of Shelby
(Direction) (Nearest Town)

Well / Borehole Data
Date drilling started: 8/29/17 Date drilling completed: 8/29/17 Hole depth: 120' Hole diameter: 2 1/2"
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 (circle 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 (circle all applicable): Home Industrial Public Supply Irrigation Fish Culture
Other (describe):
If a flowing well, method of flow regulation: Valve Other (describe)
Static Water Level: 23 feet [above or below] land surface Date measured: 8/29/17
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe):
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: .050 inches Setting depth: From 70 feet to 120 feet
Type of completion (circle all applicable): Gravel packed Underreamed 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

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County: BULIVAR
 Permit #: BW-50031

For Office Use Only:
 Well #: DA13

The sketch below only required for water wells

If well telescopes, show depths on sketch.

Ground Level

20'	Casing
20'	"
20'	"
20'	"
20'	Screen
20'	"

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

Description of Formations Encountered	From (depth)	To (depth)
TOP SOIL	Ground level	18
CLAY + FINE SAND	18	32
COURSE SAND	32	40
COURSE SAND + PEA GRAVEL	40	50
MED SAND + PEA GRAVEL	50	70
MED SAND, PEA GRAVEL, + GRAVEL	70	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) north arrow

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Landowner Name: _____

I HEREBY 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.

Charles H. Mattox LNLR-8243 11/2/17
 Print Name of Responsible Licensee and License No. Date

Charles H. Mattox
 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 39225-2309
(601)961-5210
(601) 360-0535 (fax)

For Office Use Only:
Well #: D 213
Aquifer:

County: BOLIVAR
Permit #: GW-500311
Driller: CHAD MATTOX
Date completed: 8-29-17
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: RIVES NEBLETT, P.O. BOX 26, SHELBY MS 38774, 398-5121
Well Location: Latitude: 33°57.52" Longitude: 90°47.48", Method of Lat/Long: Conventional Survey, USGS quad: NW 1/4 SW 1/4, Sec 02, T 24N, R 06W, 1.7 Miles NNW of SHELBY

Pump Type (circle one): Turbine
Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe):
Date Pump Installed: 8-29-17 Rated Pump Capacity: 3000 Gallons Per Minute
Is This Pump (circle one): New Repaired Replacement

Power Type (circle one): Diesel
Electric Diesel Gasoline Natural Gas Tractor PTO Windmill Other (describe):
Horse Power Rating of Motor: 60 Setting Depth: 70 feet Number of Stages: 1

Pump Test Data for Non Flowing Well
Date Well Tested: Duration of Pump Test (minimum 4 hours): hours
Static Water Level (A): 23 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
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe):

Pump Test Data for Flowing Well
Measured shut in head: feet.
Well yielded GPM with a drawdown of feet after hours of pumping

Meter Installation
Meter Manufacturer: Meter Serial Number:
Meter Model Number/Name: Type of Meter:
Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):
Installation Date: Meter installed by:
Is This Meter (circle one): New Repaired Replacement
Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.
DAVID P. HOLT 0-752P 9-11-17
Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer

17-0706