

# State Well Report

## Part I

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)

### For Office Use Only:

Aquifer: \_\_\_\_\_  
Well #: H-165  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: Bolivar  
Permit #: 6W 41280  
Driller: Willie L. Bryant  
Date drilling completed: 7-17-06

State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.

Well Owner Information	Well Location
Owner Name: <u>Frank Williams</u>	Latitude: <u>33° 48' 16" N</u> Longitude: <u>90° 47' 95" W</u>
Mailing Address: <u>36 Third St.</u>	Method of Lat/Long (circle one): <u>51</u> Conventional Survey, <u>44</u> <u>20</u>
<u>Cleveland</u> <u>MS</u> <u>38732</u>	USGS quad: <u>(Hand-held GPS)</u> Survey-grade GPS
City State Zip Code	<u>SE 1/4 NW 1/4</u> Sec <u>29</u> Twn <u>23 N</u> Rng <u>5 W</u>
Telephone No. <u>662 846-6181</u>	Distance <u>3 1/2</u> Miles Direction <u>west</u> of Nearest Town <u>Mengold</u>

**Well Data**

Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other: \_\_\_\_\_

Date well drilling started: 7-17-06 Date well drilling completed: 7-17-06

If flowing, method of flow regulation: Valve \_\_\_\_\_ Other (describe) \_\_\_\_\_

Static Water Level: 31' feet above or below (circle one) land surface Date measured: 7-17-06

Method of Measurement (circle one) steel tape electric tape air line other: Rope & weight

Hole depth: 110' Well depth: 110' Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 70 feet Casing diameter: 6" inches Type of casing: PVC 160

Screen length: 40 feet Screen diameter: 6" inches Type of screen: PVC slotted

Screen slot size: .032 inches Setting depth: From 70 feet to 110 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: 0 feet. If telescoped or more than one screen, describe on back of page

Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: \_\_\_\_\_

Name of organization running log(s): \_\_\_\_\_

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

Willie L. Bryant 0-639  
Print Name of Water Well Contractor and License No.

Willie L. Bryant  
Signature of Water Well Contractor

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If well telescopes please sketch below and show depths.

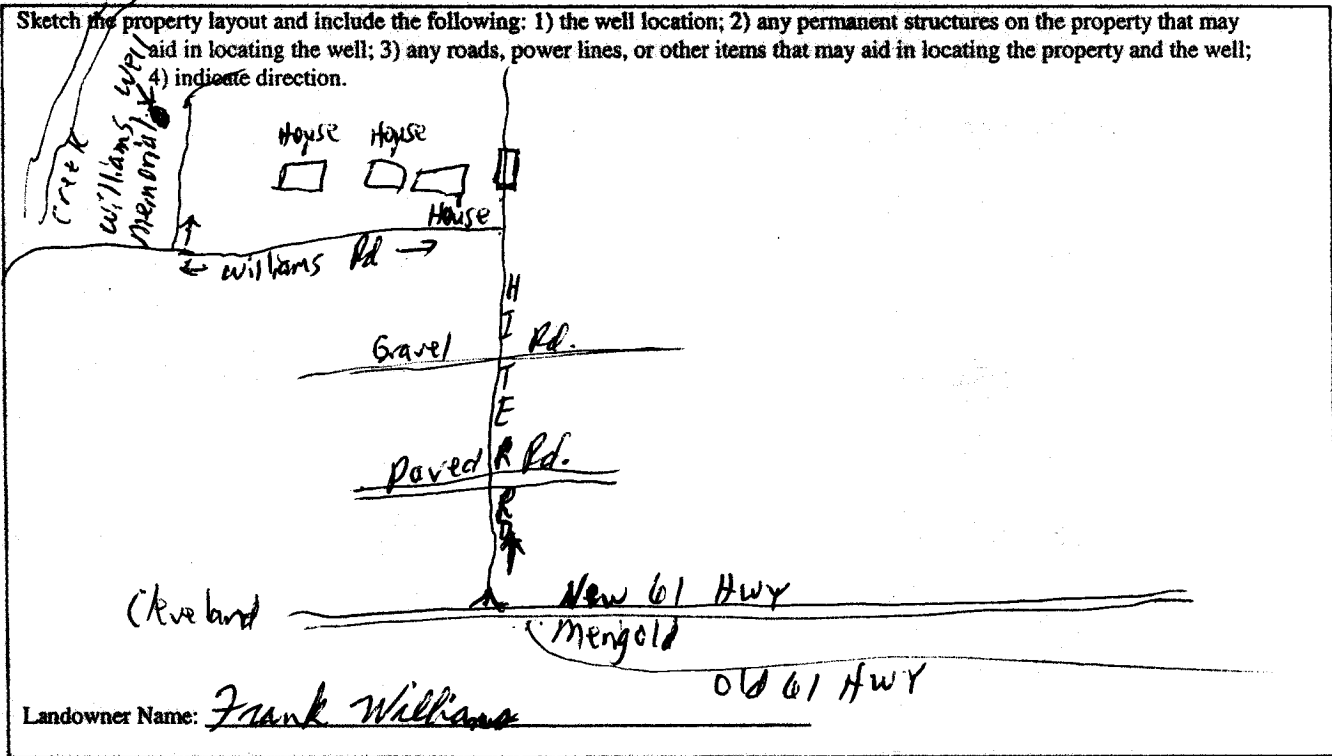
H-165

Ground Level GW 41280

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Description of Formations Encountered	From	To
Clay	0	20
Clay	20	40
Clay, fine & med Sand	40	60
med Sand + gravel	60	80
gravel	80	100
gravel + Rocks	100	110

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



Willie L. Bryant  
Signature of Water Well Contractor

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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 10631  
 Jackson, MS 39289-0631  
 (601)961-5210  
 (601)354-6938 (fax)

For Office Use Only:

Aquifer: \_\_\_\_\_

Well #: H-165

Elevation: \_\_\_\_\_

County: Bolivar  
 Permit #: 6W 41280  
 Driller: Willie L. Bryant  
 Date completed: 7-20-06

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	Well Location
Owner Name: <u>Frank Williams</u>	Latitude: <del>33° 48' 62" N</del> Longitude: <del>90° 49' 95" W</del>
Mailing Address: <u>36 Third St</u>	<u>33 48 51</u> <u>90 44 20</u>
<u>Cleveland ms 38732</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>
City                      State                      Zip Code	USGS quad, <u>(Hand-held GPS)</u> Survey-grade GPS
Telephone No. <u>(662) 846-6181</u>	<u>1/4</u> <u>1/4</u> Sec <u>29</u> Twn <u>23N</u> Rng <u>5W</u>
	Distance                      Direction                      Nearest Town
	<u>3 1/2</u> Miles <u>West</u> of <u>Merigold</u>

Pump Type Circle one	Power Type Circle one
Air Lift                      Jet <u>Submersible</u>	Diesel Engine                      Gasoline Engine                      Natural Gas
Bucket                      Piston                      Turbine	<u>Electric Motor</u> Hand                      Tractor PTO
Centrifugal                      Rotary                      Flowing Well	Windmill                      Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>10 HP</u>
Date Pump Installed: <u>7-20-06</u>	Setting Depth: <u>80</u> feet
Rated Pump Capacity: <u>375 to 425</u> Gallons Per Minute	Number of Stages: <u>1</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>7-25-06</u>	Air Line                      Electric Measuring Line                      Steel Tape
Static Water Level (A): <u>31'</u> Feet Below Land Surface	Other (specify): <u>Rope &amp; Weight</u>
Pumping Water Level (B): <u>39'</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>8'</u> Feet Below Land Surface	Well yielded <u>400</u> GPM with a drawdown of
Test Pumping Rate: <u>400</u> Gallons Per Minute	<u>8</u> feet after <u>4</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>4</u> hours	

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

Willie L. Bryant      0-639      Willie L. Bryant  
 Print Name of Pump Installer and License No. (if applicable)      Signature of Pump Installer

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