

1234

6159

STATE WELL REPORT

County: Clarke
 Permit #: MS-GW-17479
 Driller: John W Thompson
 Date drilling completed: 9-8-2020

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)961-5555
 (601)961-5228 (fax)

For Office Use Only:
 Well #: 6159
 Aquifer: _____
 E-Log #: _____

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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)	Well or Borehole Location
Owner Name: <u>City of Quitman</u>	Latitude: <u>N32°3'41"</u> Longitude: <u>88°43'38.83"</u>
Mailing Address: <u>101 E. Church St</u> <u>Quitman MS 39355</u>	Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
City _____ State _____ Zip Code _____	<u>SE</u> ¼ <u>NK</u> ¼, Sec <u>35</u> T <u>3N</u> R <u>15E</u>
Telephone No. (____) _____	<u>0</u> Miles _____ of <u>Quitman</u> (Distance) (Direction) (Nearest Town)

Well / Borehole Data

Date drilling started: 8-6-2020 Date drilling completed: 9-8-2020 Hole depth: 325 Hole diameter: 21"

Location of the source of any surface water used for drilling: Hydrant

Method of dosing and volume of Chlorine used in drilling and development: _____

Logs run (check all applicable): log run Electric Gamma Ray Density Sonic Neutron Other: _____

Name of organization running log(s): Teaco a logged test well (6158)

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 all applicable): Home Industrial Public Supply Irrigation Fish Culture
Other (describe): Municipal

If a flowing well, method of flow regulation: Valve _____ Other (describe) _____

Static Water Level: 72 feet above or below land surface Date measured: 9-8-2020
(check one)

Method of measurement (check one) Steel tape Electric tape Air line Other (describe): _____

Well depth: 321 Well grouted to a depth of: 260 feet Type of grout (check one) Neat Cement Bentonite Mix

Casing length: 260 feet Casing diameter: 16 inches Type of casing: Steele

Screen length: 55 feet Screen diameter: 10" inches Type of screen: 8x10" munipac

Screen slot size: .020 + .025 inches Setting depth: From .020 265-285 feet to .25 285-320 feet

Type of completion (check all applicable) Travel packed Underreamed Open hole Natural Development
Other (describe): _____

Top of lap pipe or reduction in casing: 205 feet

If telescoped or more than one screen, describe on next page

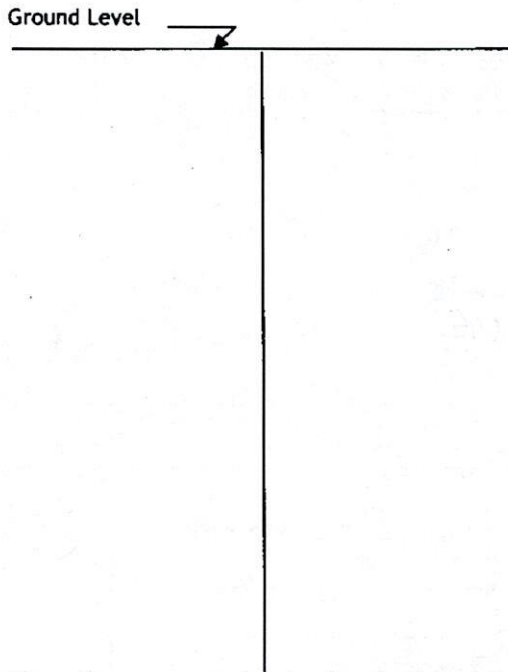
County: Clarke
 Permit #: _____

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The sketch below only required for water wells

If well telescopes, show depths on sketch.



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

Description of Formations Encountered	From (depth) Ground level	To (depth)
Sandy Clay	Ground level	50
Clay	50	120
sand	120	140
Clay	140	200
sand	200	220
Clay	220	260
sand	260	325

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

Landowner Name: Quitman

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.

John W Thompson 0-679 10-9-2020 John W Thompson
 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 2309
Jackson, MS 39225-2309

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

For Office Use Only:

Well #: G 159

Aquifer: _____

County: Clarke
Permit #: 6W 17479
Driller: Thompson
Date completed: 12-10-20
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>City of Quitman</u>	Latitude: <u>N32° 3' 41"</u> Longitude: <u>88° 43' 38.83"</u>
Mailing Address: <u>101 E Church St</u> <u>Quitman MS 39355</u>	Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
City _____ State _____ Zip Code _____	<u>SE</u> ¼ <u>NE</u> ¼, Sec <u>35</u> T <u>3N</u> R <u>15E</u>
Telephone No. (____) _____	<u>0</u> Miles _____ of <u>Quitman</u> (Distance) (Direction) (Nearest Town)

Pump Type (check one)

Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe): _____

Date Pump Installed: 12-10-20 Rated Pump Capacity: 750 Gallons Per Minute

Is This Pump (check one): New Repaired Replacement

Power Type (check one)

Electric Diesel Gasoline Natural Gas Tractor PTO Windmill Other (describe): _____

Horse Power Rating of Motor: 75 Setting Depth: 150 feet Number of Stages: _____

Pump Test Data for Non Flowing Well

Date Well Tested: 12-29-20 Duration of Pump Test (minimum 4 hours): 8 hours

Static Water Level (A): 71.9 Feet Below Land Surface Pumping Water Level (B): 132.9 Feet Below Land Surface

Drawdown [(B) - (A)]: 61 Feet Below Land Surface Test Pumping Rate: 750 Gallons Per Minute

Method of measurement (check one): Steel tape Electric tap 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 (check 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.

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

John W Thompson 0-677 1/12/21 John W Thompson
Print Name of Pump Installer And License No. (if applicable) Date Signature of Pump Installer

Quitman MS

6159 Clarke Co

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21" Hole to 260'
 16" .375 internally coated
 casing @ 260'
 Cement 9-20-2020



12" .375 coated lap w/landing threads
 f/ 254.33 - 205.70
 12" SS lap w/9x12" surge f/ 265' - 254.33
 8" x 10" .020" prepack f/ 265' - 295'
 8" x 10" .025" prepack f/ 295' - 320.16
 2-4" BWV



Thompson Brothers Drilling

"Our Most Important Asset Wears a Hardhat"

5410 Highway 11 North
Ellisville, MS 39437
(601) 425-0970
Fax (601) 425-0972

Mr. Bronzon Miles
Fontaine Engineering, LLC
115 Main Street
Quitman, Mississippi 39355

Re: Pump Submittal for City of Quitman Well # 5

Dear Mr. Miles:

Thompson Brothers Drilling, Inc. has performed a 24 hr pumping test on Well # 5. The pertinent data is as follows:

1. Test Capacity per specifications- 900 gpm
2. Static Water Level – 71.8'
3. Above ground head per specifications- 57 psi/131.67'
4. Specific capacity- 11.06 gal/ft/day
5. Drawdown @ 900 gpm @ 24 hrs- 81.4'
6. Contract capacity- 750 gpm
7. Drawdown @ 750 gpm- 67.8'
8. Column Friction loss- 3.8'
9. Total head @ 750 gpm- 275.07'
10. Submitted bowl assembly – Goulds 7 stage 10RJHC
11. Total head on the pump- 277'
12. Submitted column assembly- 180' of 1.24" X 8" water lube column with stainless shafting
13. Horsepower- 75 hp

I am attaching the 24 hr. pumping test and submittal data. Thank you

Perry Bridges
601-319-8243

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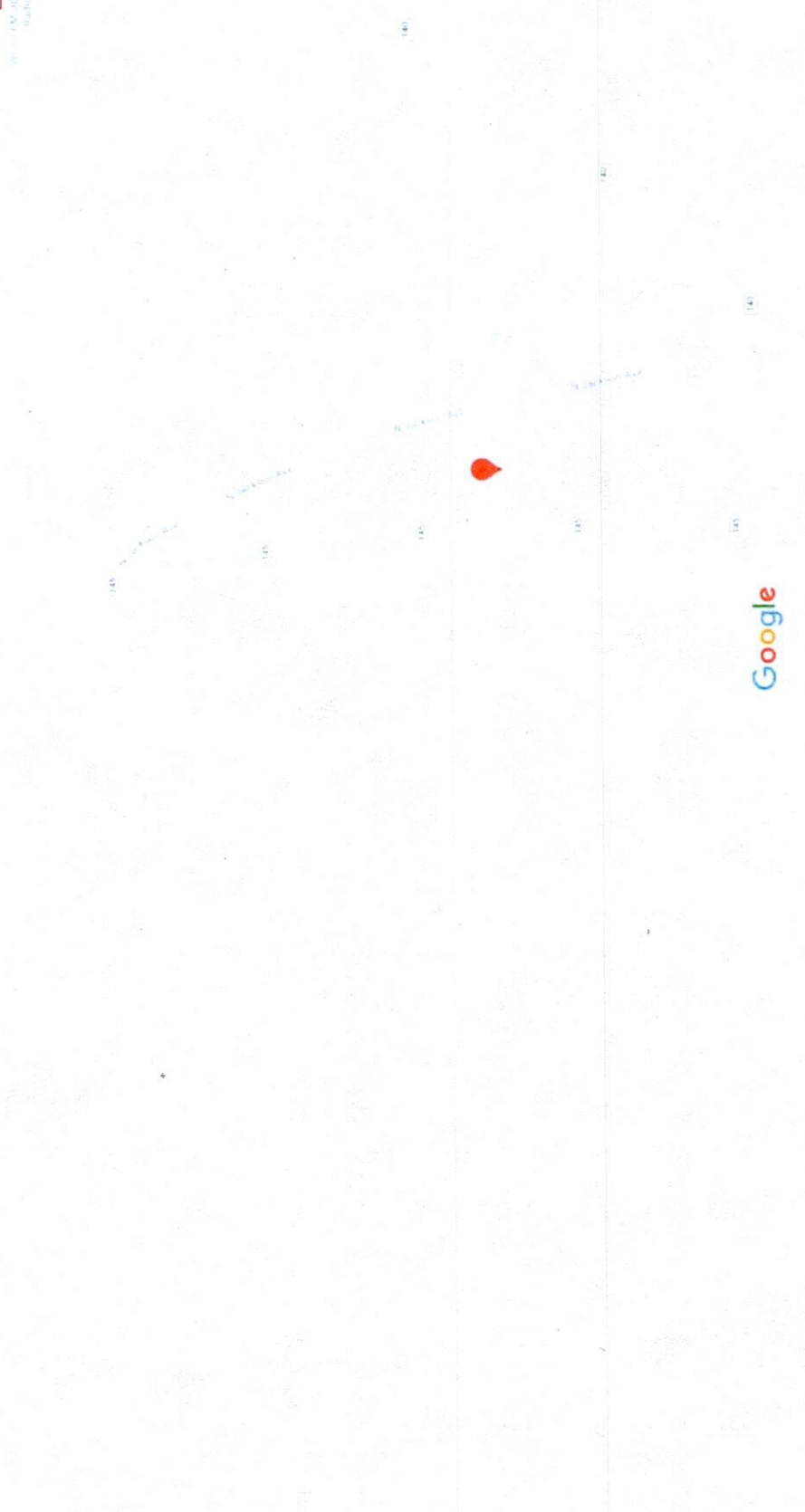
10/9/2020

32°03'41.7"N 88°43'38.5"W - Google Maps

Google Maps 32°03'41.7"N 88°43'38.5"W

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WILSON COUNTY
CLERK OF SUPERIOR
COURT



Map data ©2020 100 ft