

State Well Report

Part I - 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: Coahoma
Permit #: MS 6W-50016
Driller: TEDDY CARTS
Date drilling completed: 7/19/17

For Office Use Only:
Aquifer:
Well #: L139
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)
Owner Name: FIDON SCHMIDT
Mailing Address: 33 Schmidt Road, Clarksdale MS 38614
Telephone No.:
Well or Borehole Location
Latitude: 34 4 50 Longitude: 90 42 37
Method of Lat/Long (circle one): Conventional Survey, Hand-held GPS, Survey-grade GPS
USGS quad: NE 1/4 SE 1/4 Sec. 32 Twn 26N Rng 04W
Distance: 6 Miles Direction: SW of Nearest Town: BOBO

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Well / Borehole Data
Date drilling started: 7/19/17 Date drilling completed: 7/19/17 Hole depth: 116 Hole diameter: 8.25
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):

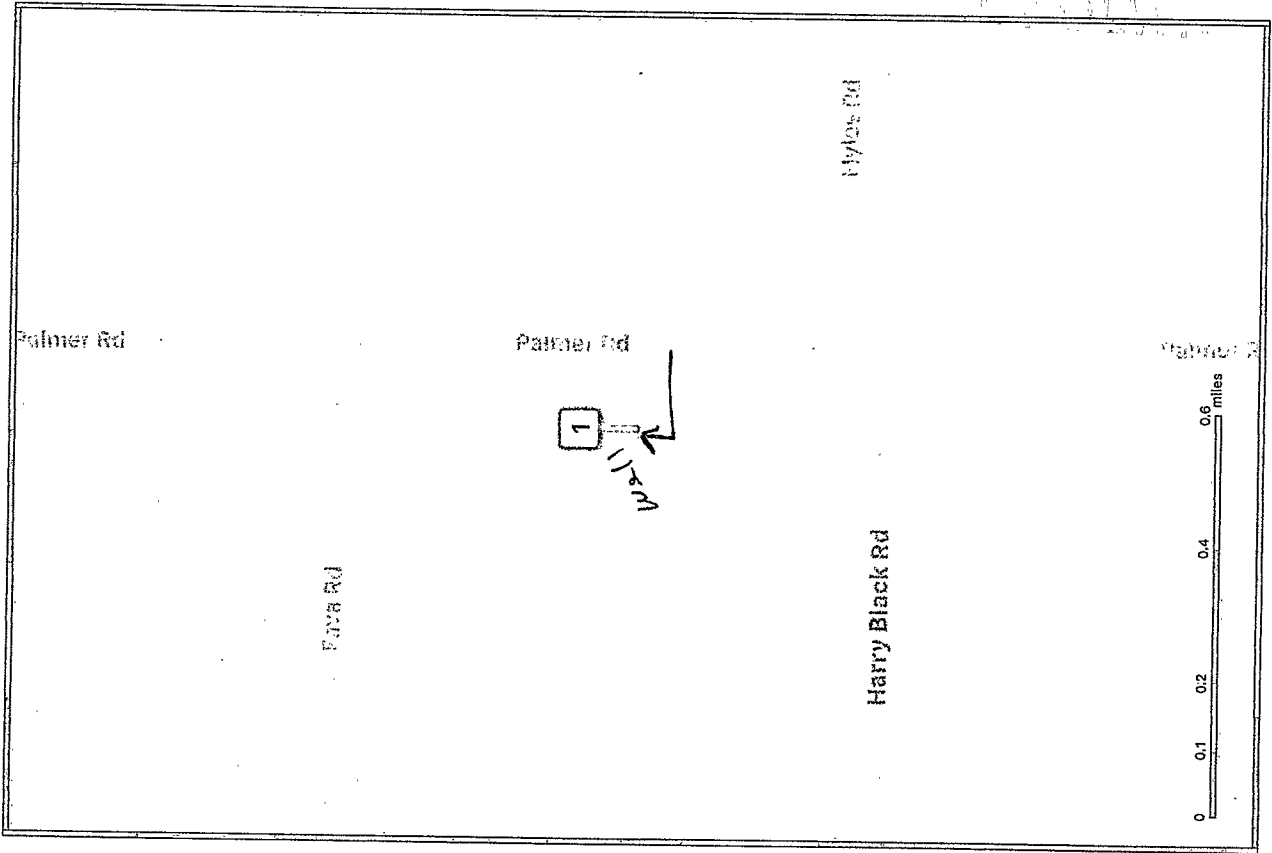
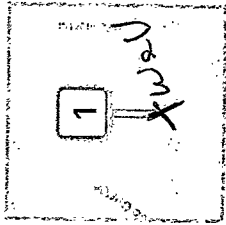
If drilling is not related to water well construction, skip the remainder of this block
Purpose of Well (check one): Home Industrial Public Supply Irrigation Fish Culture Other:
If a flowing well, method of flow regulation: Valve Other (describe):
Static Water Level: 20 feet above or below (circle one) land surface Date measured: 7/19/17
Method of Measurement (circle one) steel tape electric tape air line other:
Well depth: 116 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix
Casing length: 76 feet Casing diameter: 16 inches Type of casing: P.V.C
Screen length: 40 feet Screen diameter: 16 inches Type of screen: P.V.C
Screen slot size: 0.50 inches Setting depth: From 76 feet to 80.116 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



34 4 50n 90 37 40w
near Clarksdale

Clarksdale, MS 38614
Clarksdale, MS 38614

L139



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)

County: Coahoma
 Permit #: MS 6W-50016
 Driller: TEDDY Coats
 Date completed: 7/19/17
Copy information from block on Part 1

For Office Use Only:

Aquifer: _____
 Well #: L139
 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>EIDAN Schmidt</u>	Latitude: <u>34</u> ^{<u>4</u>} ^{<u>50</u>}
Mailing Address: <u>33 Schmidt Road</u> <u>Clarksdale MS 38614</u> City State Zip Code	Longitude: <u>90</u> ^{<u>37</u>} ^{<u>40</u>}
Telephone No. () _____	Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> Survey-grade GPS _____ <u>NE 1/4 SE 1/4 Sec 32 T26N R 04W</u>
	Distance Direction Nearest Town <u>6 Miles SW of BOB</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet Submersible	<u>Diesel Engine</u> Gasoline Engine Natural Gas
Bucket Piston <u>Turbine</u>	Electric Motor Hand <u>BY OLWIN</u> Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>60 HP</u>
Date Pump Installed: <u>7/19/17</u>	Setting Depth: <u>80</u> feet
Rated Pump Capacity: <u>2500</u> Gallons Per Minute	Number of Stages: <u>2</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>7/19/17</u>	Air Line Electric Measuring Line <u>Steel Tape</u>
Static Water Level (A): <u>30</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>40</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>10</u> Feet Below Land Surface	Well yielded <u>2500</u> GPM with a drawdown of <u>10</u> feet after <u>4</u> hours of pumping
Test Pumping Rate: <u>2500</u> Gallons Per Minute	
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.

TEDDY Coats #5318 Teddy Coats
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer