

County: Copiah  
 Name: Larry Easley  
 License No.: 75-07

**State Well Report**  
 Part I - Driller's Log  
 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 #: X-20  
 L.S. Elevation: \_\_\_\_\_  
 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: Jaine Carlisle  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Telephone No.: \_\_\_\_\_

Well or Borehole Location  
 Latitude: 31 44 11 Longitude: 90 14 38  
 Method of Lat/Long (circle one): Conventional Survey  
 USGS quad, Hand-held GPS, Survey-grade GPS  
 Twp: 19 N Rng: 10 E  
 Distance: \_\_\_\_\_ Direction: \_\_\_\_\_ Nearest Town: \_\_\_\_\_  
 Miles: \_\_\_\_\_ of \_\_\_\_\_

Well / Borehole Data  
 Date drilling started: 7-1-07 Date drilling completed: 7-5 Hole depth: 500 Hole diameter: 7 7/8  
 Location of the source of any surface water used for drilling: Community Water line  
 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): \_\_\_\_\_

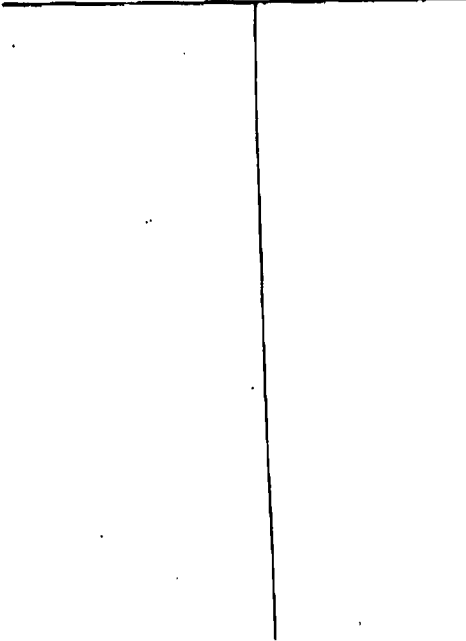
*If drilling is not related to water well construction, skip the remainder of this block*  
 Purpose of Well (check one):  Home  Industrial  Public Supply  Irrigation  Fish Culture  Other: \_\_\_\_\_  
 Flowing well, method of flow regulation: Valve \_\_\_\_\_ other (describe): \_\_\_\_\_  
 Static Water Level: 250 feet above or below (circle one) land surface \_\_\_\_\_ Date measured: 7-21-07  
 Method of Measurement (circle one):  Steel tape  electric tape \_\_\_\_\_ other: \_\_\_\_\_  
 Well depth: 470 feet Well grouted to a depth of 20 feet Type of grout (circle one):  Best Cement  Benmorin  Mix  
 Casing length: 470 feet Casing diameter: 4 inches Type of casing: PVC  
 Screen length: 60 feet Screen diameter: 4 inches Type of screen: PVC  
 Screen slot size: 008 inches Setting depth: From 470 feet to 470 feet  
 Use 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 in next page*

Form: OLWR-SWR-1A

X-20

If well telescopes please sketch below and show depths

Ground Level



Description of Formations Encountered	From	To
CLAY	0	200
SAND	200	225
CLAY	225	240
SAND	240	280
CLAY	280	380
SAND	380	470
CLAY	470	500

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) indicate direction.

Landowner Name: Jaime Caetile

[Signature]  
Signature of Water Well Contractor

# 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)

County Copiah  
 Permit # \_\_\_\_\_  
 Driller \_\_\_\_\_  
 Date completed 1-20-07

For Office Use Only

Aquifer \_\_\_\_\_  
 Well # X-20  
 Elevation \_\_\_\_\_

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

Owner Name Jaime Carlisle  
 Mailing Address \_\_\_\_\_  
 \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Telephone No. (\_\_\_\_\_) \_\_\_\_\_

Well Location

Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Method of Lat/Long (circle one): Conventional Survey  
 \_\_\_\_\_  
 USGS quad. Hand-held GPS. Survey-grade \_\_\_\_\_  
 \_\_\_\_\_  
 Distance \_\_\_\_\_ Direction \_\_\_\_\_ Nearest Town \_\_\_\_\_  
 \_\_\_\_\_ Miles \_\_\_\_\_ of \_\_\_\_\_

Pump Type  
Circle one

Air Lift \_\_\_\_\_ Jet \_\_\_\_\_ Submersible  
 Bucket \_\_\_\_\_ Piston \_\_\_\_\_ Turbine \_\_\_\_\_  
 Centrifugal \_\_\_\_\_ Rotary \_\_\_\_\_ Flowing Well \_\_\_\_\_  
 Other (specify) \_\_\_\_\_  
 Date Pump Installed 7-21-07  
 Rated Pump Capacity 50 Gallons Per Minute

Power Type  
Circle one

Diesel Engine \_\_\_\_\_ Gasoline Engine \_\_\_\_\_  
Electric Motor \_\_\_\_\_ Hand \_\_\_\_\_  
 Windmill \_\_\_\_\_ Other (specify) \_\_\_\_\_  
 Horse Power Rating of Motor 5  
 Setting Depth 315 feet  
 Number of Stages: 30

Pump Test Data

Date Well Tested 7-21-07  
 Static Water Level (A) 250 Feet Below Land Surface  
 Pumping Water Level (B) 270 Feet Below Land Surface  
 Drawdown ((B) - (A)) 20 Feet Below Land Surface  
 Test Pumping Rate 50 Gallons Per Minute  
 Duration of Pump Test (minimum 4 hours) 4 hours

Method of Measuring Water Level  
Circle one

Air Line \_\_\_\_\_ Electric Measuring Line \_\_\_\_\_  
 Other (specify) \_\_\_\_\_  
 For flowing well, measured shut in head: \_\_\_\_\_  
 Well yielded 50 GPM with a drawdown of \_\_\_\_\_  
20 feet after 4 hours of pumping

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

LARRY EASLEY \_\_\_\_\_  
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer