

# 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: Covington  
Permit #: 0-586  
Driller: JAMES WELLS  
Date drilling completed: 6-16-10

For Office Use Only:  
Aquifer: \_\_\_\_\_  
Well #: G 70  
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)	Well or Borehole Location
Owner Name: <u>Bruce Holder</u>	Latitude: <u>31° 41' 33"</u> Longitude: <u>89° 30' 58"</u>
Mailing Address: <u>862 Lake Mike Corner Rd</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
<u>Collins MS 39428</u>	<u>1/4 NW 1/4 Sec 4 Twn 8N Rng 15W</u>
City State Zip Code	Distance Direction Nearest Town
Telephone No. ( <u>601</u> ) <u>765-1944</u>	<u>8</u> Miles <u>N</u> of <u>Collins</u>

Well / Borehole Data

Date drilling started: 6-16-10 Date drilling completed: 6-16-10 Hole depth: 95 Hole diameter: 7 1/2"

Location of the source of any surface water used for drilling: running creek

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

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: 60 feet above or below (circle one) land surface Date measured: 6-16-10

Method of Measurement (circle one)  steel tape  electric tape  air line other: \_\_\_\_\_

Well depth: 95 Well grouted to a depth of 10 feet Type of grout (circle one):  Neat Cement  Bentonite  Mix

Casing length: 75 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 20 feet Screen diameter: 4 inches Type of screen: PVC

Screen slot size: .008 inches Setting depth: From 75 feet to 95 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*

Form: OLWR-SWR-1A (04/08)

RECEIVED

JUL 12 2010

BY: OLWR

If well telescopes please sketch below and show depths.

G-70

Ground Level

Empty rectangular box for well sketches, with 'Ground Level' written at the top left.

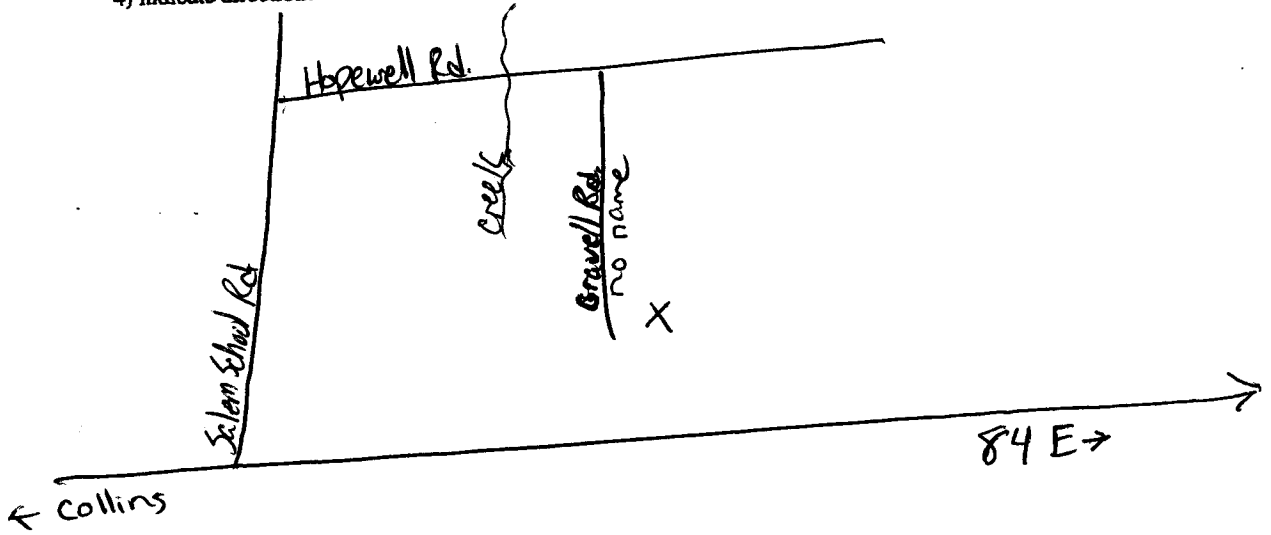
Description of Formations Encountered

From To

Description of Formations Encountered	From	To
topsoil	0	1
clay	1	60
sand	60	95

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: Bruce Holder

James Wells  
Signature of Water Well Contractor

RECEIVED  
JUL 12 2000  
BY: OLWF

# 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 #: G 70

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

County: Covington  
Permit #: \_\_\_\_\_  
Driller: JAMES WELLS  
Date completed: 6-16-10

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: Bruce Holder  
Mailing Address: 862 Lake Mike Conner Rd.  
Collins MS 39428  
City State Zip Code  
Telephone No. (601) 765-1944

### Well Location

Latitude: 31°41'33"N Longitude: 89°30'58"W  
Method of Lat/Long (circle one): Conventional Survey,  
USGS quad, Hand-held GPS, Survey-grade GPS  
\_\_\_\_ ¼ \_\_\_\_ ¼ Sec 4 Twn 8N Rng 15W  
Distance Direction Nearest Town  
8 Miles N of Collins

### Pump Type Circle one

Air Lift Jet Submersible  
Bucket Piston Turbine  
Centrifugal Rotary Flowing Well  
Other (specify): \_\_\_\_\_  
Date Pump Installed: 6-16-10  
Rated Pump Capacity: 12 Gallons Per Minute

### Power Type Circle one

Diesel Engine Gasoline Engine Natural Gas  
Electric Motor Hand Tractor PTO  
Windmill Other (specify): \_\_\_\_\_  
Horse Power Rating of Motor: 1  
Setting Depth: 75 feet  
Number of Stages: 14

### Pump Test Data

Date Well Tested: 6-16-10  
Static Water Level (A): 60 Feet Below Land Surface  
Pumping Water Level (B): 75 Feet Below Land Surface  
Drawdown [(B) - (A)]: 65 Feet Below Land Surface  
Test Pumping Rate: 18 Gallons Per Minute  
Duration of Pump Test (minimum 4 hours): 4 hours

### Method of Measuring Water Level Circle one

Air Line Electric Measuring Line Steel Tape  
Other (specify): \_\_\_\_\_  
For flowing well, measured shut in head: \_\_\_\_\_ feet  
Well yielded 18 GPM with a drawdown of  
5 feet after 4 hours of pumping

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

JAMES WELLS 0-586  
Print Name of Pump Installer and License No. (if applicable)

James Wells  
Signature of Pump Installer

RECEIVED  
JUL 12 2010  
BY: OLWR