

County: Desoto  
 Permit #: \_\_\_\_\_  
 Driller: Kenny Dunlop  
 Date drilling completed: 12-17-04

**Well Driller Report and Well 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 #: D-90  
 L. S. Elevation: \_\_\_\_\_  
 E-log #: \_\_\_\_\_

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>Kenny Dunlop</u>	Latitude: <u>34° 58' 03"</u> Longitude: <u>089° 46' 22"</u>
Mailing Address: <u>7051 Stanley drive</u>	Method of Lat/Long (circle one): <u>Hand-held GPS</u> Conventional Survey
<u>LOT 34</u>	USGS quad, <u>Hand-held GPS</u> Survey-grade GPS
<u>Olive Branch MS 38654</u>	<u>NE 1/4 SW 1/4 Sec 30</u> Twn <u>1S</u> Rng <u>5W</u>
City State Zip Code	Distance <u>1314</u> Miles Direction <u>W</u> of Nearest Town <u>Handy Corner</u>
Telephone No. <u>(901) 490-3066</u>	

**Well Data**

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

Date well drilling started: 12-17-04 Date well drilling completed: 12-17-04

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

Static Water Level: 102' feet above or below (circle one) land surface Date measured: 12-17-04

Method of Measurement (circle one) steel tape electric tape air line other: string / weight

Hole depth: 230' Well depth: 230 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 220 feet Casing diameter: 4 inches Type of casing: pvc

Screen length: 10 feet Screen diameter: 4 inches Type of screen: pvc

Screen slot size: .010 inches Setting depth: From 220 feet to 230 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: NA 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.

Joey W. Mosa 0620 \_\_\_\_\_  
 Print Name of Water Well Contractor and License No. Signature of Water Well Contractor

If well telescopes please sketch below and show depths.

log mailed 1/13/05

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 BY: OLWF

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If well telescopes please sketch below and show depths.

Ground Level D-90



Description of Formations Encountered	From	To
clay dirt	0	15
gravel	15	25
white sand	25	35
Blue clay	35	100
white sand	100	130
Blue clay	130	200
white sand	200	230

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: Kenny Dunlop M

Gore W. Moran  
 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)

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For Office Use Only:

Aquifer: \_\_\_\_\_  
Well #: D-90  
Elevation: \_\_\_\_\_

County: Desoto  
Permit #: \_\_\_\_\_  
Driller: Jones W. Mason  
Date completed: 12-17-04

This report must be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump. A copy of Part 1 of this report must be attached to this report.

Well Owner Information	Well Location
Owner Name: <u>Kenny Doolap</u>	Latitude: <u>34-58-044</u> Longitude: <u>089-46-360</u>
Mailing Address: <u>7051 Stanley drive</u> <u>LOT 34</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS
<u>Osage</u> <u>Booth</u> <u>MS</u> <u>38654</u> City State Zip Code	<u>NE</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$ Sec <u>30</u> Twn <u>1S</u> Rng <u>5W</u>
Telephone No. <u>(901) 490-3066</u>	Distance Direction Nearest Town <u>13/4</u> Miles <u>W</u> of <u>honey corner</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet <input type="radio"/> <u>Submersible</u> <input type="radio"/>	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston <input type="radio"/> Turbine <input type="radio"/>	<u>Electric Motor</u> <input type="radio"/> Hand <input type="radio"/> Tractor PTO <input type="radio"/>
Centrifugal Rotary <input type="radio"/> Flowing Well <input type="radio"/>	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>3/4</u>
Date Pump Installed: <u>12-17-04</u>	Setting Depth: <u>140</u> feet
Rated Pump Capacity: <u>12</u> Gallons Per Minute	Number of Stages: <u>11</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>12-17-04</u>	Air Line Electric Measuring Line Steel Tape
Static Water Level (A): <u>102</u> Feet Below Land Surface	Other (specify): <u>string weight</u>
Pumping Water Level (B): <u>NA</u> Feet Below Land Surface	For flowing well, measured shut in head: <u>NA</u> feet
Drawdown [(B) - (A)]: <u>NA</u> Feet Below Land Surface	Well yielded <u>12</u> GPM with a drawdown of
Test Pumping Rate: <u>12</u> Gallons Per Minute	<u>NA</u> feet after <u>24</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>24</u> hours	

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

Jones W. Mason  
Print Name of Pump Installer and License No. (if applicable)

Jones W. Mason  
Signature of Pump Installer

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