State Well Report
Part 1

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: DESOTO
Permit #:
Driller: BOB SMITH
Date drilling completed: 5-17-09

For Office Use Only:
Aquifer:
Well #: F155
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

Owner Name: LARRY BOOTH
Mailing Address: 5148 STARLANDING RD.
LAKE COMMANCHE MS 38641
City State Zip Code
Telephone No. (662) 812-3490

Well Location

Latitude: 34 • 54 • 37 " Longitude: 90 • 05 • 30 "
Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
NW ¼ SW ¼ Sec. 18 Twn T25 Rng R8W
Distance 4 Miles Direction S of Nearest Town HORNLAKE

Well Data

Purpose of Well (circle one) Home Industrial Public Supply (Irrigation) Fish Culture Other:
Date well drilling started: 5-17-09 Date well drilling completed: 5-17-09
If flowing, method of flow regulation: Valve Other (describe)
Static Water Level: 120 feet above or (below) (circle one) land surface Date measured: 6-18-09
Method of Measurement (circle one) steel tape electric tape air line other: LINE & WEIGHT
Hole depth: 345 Well depth: 345 Well grouted to a depth of 10 feet
Type of grout (circle one): (Cement) Bentonite Mix
Casing length: 325 feet Casing diameter: 4 inches Type of casing: PVC
Screen length: 20 feet Screen diameter: 4 inches Type of screen: PVC
Screen slot size: 13 MILS inches Setting depth: From 325 feet to 345 feet
Type of completion (circle all applicable): (Gravel packed) Undereamed 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 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.

BOB SMITH 0-645
Print Name of Water Well Contractor and License No.

Signature of Water Well Contractor

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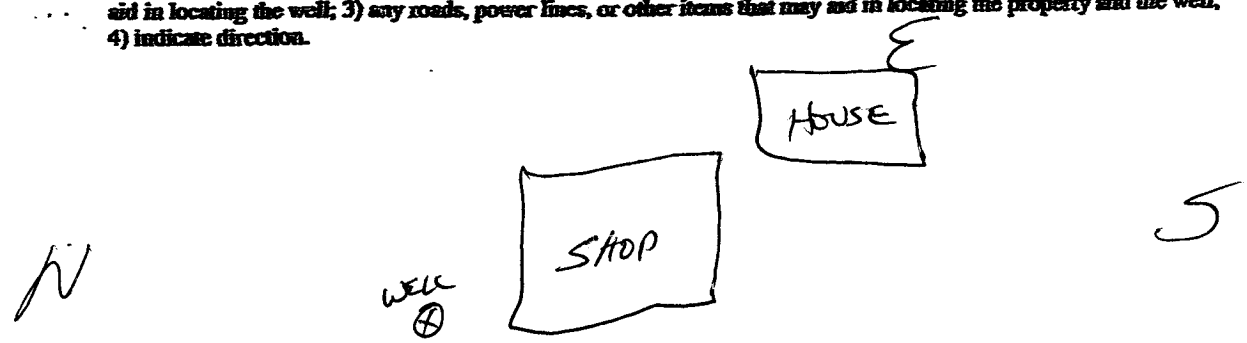
FISS

Ground Level

Description of Formations Encountered	From	To
TOP SOIL	0	5
BROWN CLAY	5	26
GRAVEL	26	34
WHITE CLAY	34	140
WHITE SAND	140	150
ROCK	150	157
GREY CLAY	157	320
ROCK	320	321
WHITE SAND	321	345

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: Larry Booth

Signature of Water Well Contractor

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JUN 16 2009
BY: OLWR

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: DESOTO
Permit #:
Driller: BOB SMITH
Date completed: 5-18-09

For Office Use Only:
Aquifer:
Well #: FISS
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: LARRY BOOTH
Mailing Address: 5148 STRAWBERRY RD
LAKE CORMORANT, MS. 38641
City State Zip Code
Telephone No. 662 812-3490

Well Location

Latitude: 34° 54' 37" Longitude: 90° 05' 30"
Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
NW ¼ SW ¼ Sec 18 Twn T25 Rng R8W
Distance 4 Miles Direction S of Nearest Town HORNBEAK

Pump Type
Circle one

Air Lift, Jet, (Submersible), Bucket, Piston, Turbine, Centrifugal, Rotary, Flowing Well
Other (specify):
Date Pump Installed: 5-18-09
Rated Pump Capacity: 20 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: 1½
Setting Depth: 160 feet
Number of Stages: 12

Pump Test Data

Date Well Tested: 5-18-09
Static Water Level (A): Feet Below Land Surface
Pumping Water Level (B): 127 Feet Below Land Surface
Drawdown [(B) – (A)]: 7 Feet Below Land Surface
Test Pumping Rate: 18 Gallons Per Minute
Duration of Pump Test (minimum 4 hours): hours

Method of Measuring Water Level
Circle one

Air Line, Electric Measuring Line, Steel Tape
Other (specify): LINE + WEIGHT
For flowing well, measured shut in head: feet
Well yielded 18 GPM with a drawdown of 7 feet after hours of pumping

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

BOB SMITH 0645
Print Name of Pump Installer and License No. (if applicable)

Signature of Pump Installer

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JUN 16 2009
BY: OLWR