

DeSoto

382

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 39225-2309
(601)961-5210
(601)360-0535 (fax)

For Office Use Only:

Well #: H 259
Aquifer:
E-Log #:

County: Marshall
Permit #: UNR-09976
Driller: Larry Carpenter
Date drilling completed: 12-5-20

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.

Well Owner Information: Anderson Homes, 13577 Fairview Rd., Byhalia, MS 38611. Well or Borehole Location: Latitude 34.875003, Longitude 89.749274. Method of Lat/Long: Conventional Survey. USGS quad: NW 1/4 NE 1/4, Sec 32, T 29 S, R 5 W. 3 Miles West of Byhalia, MS.

Well / Borehole Data: Date drilling started/completed: 12-5-20. Hole depth: 170. Hole diameter: 8". Location of source: well water. Method of dosing: 1/2 lb. chlorine / 1,000 gal water. Logs run: Electric. Purpose of borehole: Water Well. Purpose of Well: Home. Static Water Level: 107 feet. Date measured: 12-7-20. Method of measurement: Steel tape. Well depth: 170. Well grouted to a depth of: 10. Type of grout: Great Cement. Casing length: 150. Casing diameter: 4. Type of casing: PVC. Screen length: 20. Screen diameter: 4. Type of screen: PVC. Screen slot size: .013. Setting depth: From 150 to 170. Type of completion: Gravel packed.

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De Soto 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 39225-2309
(601)961-5210
(601) 360-0535 (fax)

For Office Use Only:

Well #: H 259
Aquifer:

County: Marshall
Permit #: UNR-09976
Driller: Larry Carpenter
Date completed:
Copy information from block on Part 1

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: Anderson Homes, 13577 Fairview Rd, Byhalia, MS 38611
Well Location: Latitude 34.875003, Longitude 89.749274, Method of Lat/Long: Conventional Survey, USGS quad NW 1/4 NE 1/4, Sec 32, T 2S, R 5W, 3 miles West of Byhalia

Pump Type (circle one): Submersible
Date Pump Installed: 12-7-20
Rated Pump Capacity: 10 Gallons Per Minute
Is This Pump (circle one): New

Power Type (circle one): Electric
Horse Power Rating of Motor: 3/4
Setting Depth: 140 feet
Number of Stages: 10

Pump Test Data for Non Flowing Well
Date Well Tested: 12-7-20
Duration of Pump Test (minimum 4 hours): 4 hours
Static Water Level (A): 107 Feet Below Land Surface
Pumping Water Level (B): 111 Feet Below Land Surface
Drawdown [(B) - (A)]: 111 Feet Below Land Surface
Test Pumping Rate: 10 Gallons Per Minute
Method of measurement (circle one): Steel tape

Pump Test Data for Flowing Well
Measured shut in head: feet.
Well yielded GPM with a drawdown of feet after hours of pumping

Meter Installation
Meter Manufacturer:
Meter Serial Number:
Meter Model Number/Name:
Type of Meter:
Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):
Installation Date:
Meter installed by:
Is This Meter (circle one): New
Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.

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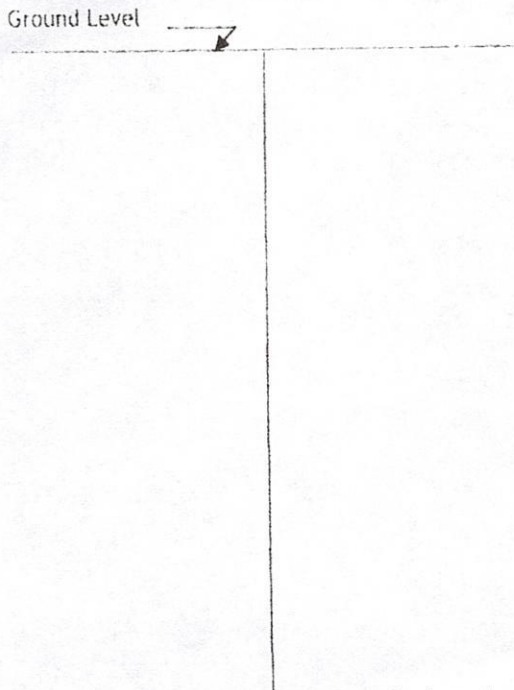
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.
Larry Carpenter UNR-09976 12-8-20 Larry Carpenter
Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer

County: Marshall
 Permit #: UNR-09976

For Office Use Only:
 Well #: _____

The sketch below only required for water wells

If well telescopes, show depths on sketch.



Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth) Ground level	To (depth)
Top Surface Soil	0	19
Red Clay	19	31
Red Sand	31	50
fine Sand	50	65
White Gravel	65	75
Small Brown Gravel	75	95
Fine White Sand	95	110
Medium Sand	110	132
Coarse White Sand	132	176

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) north arrow

Landowner Name: _____

I HEREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state laws.

Larry Carpenter UNR-09976 12-8-20 Larry Carpenter
 Print Name of Responsible Licensee and License No. Date Signature of Licensee

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