

County: Desoto  
 Permit #: \_\_\_\_\_  
 Driller: James W. Mason  
 Date drilling completed: 4-15-05

### 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 #: J-121  
 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>Jeff Dawdy</u>                   | Latitude: <u>34° 50' 570"</u> Longitude: <u>090° 07' 706"</u>   |
| Mailing Address: <u>7823 misty meadows Dr</u>   | Method of Lat/Long (circle one): Conventional Survey, <u>34</u> <u>92</u>   |
| <u>Hernando MS 38630</u><br>City State Zip Code | USGS quad, <u>(Hand-held GPS)</u> Survey-grade GPS <u>9w</u>  |
| Telephone No. <u>(901) 603 8865</u>             | <u>NW</u> <u>11</u> <u>35</u> <u>35</u><br>Distance Direction Nearest Town<br><u>1 1/2</u> Miles <u>NE</u> of <u>Eudora</u> |

#### Well Data

Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other: \_\_\_\_\_  
 Date well drilling started: 4-15-05 Date well drilling completed: 4-15-05  
 If flowing, method of flow regulation: Valve NA Other (describe) \_\_\_\_\_  
 Static Water Level: 30' feet above or (below) (circle one) land surface Date measured: 4-16-05  
 Method of Measurement (circle one) steel tape electric tape air line other: string weight  
 Hole depth: 115' Well depth: 115' Well grouted to a depth of 10 feet  
 Type of grout (circle one): Cement Bentonite Mix  
 Casing length: 95 feet Casing diameter: 4 inches Type of casing: pvc  
 Screen length: 20 feet Screen diameter: 4 inches Type of screen: pvc  
 Screen slot size: .010 inches Setting depth: From 95 feet to 115 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.

James W. Mason 0-620  
 Print Name of Water Well Contractor and License No.

James W. Mason  
 Signature of Water Well Contractor

If well telescopes please sketch below and show depths.



# 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 #: J-121  
Elevation: \_\_\_\_\_

County: Desoto  
Permit #: \_\_\_\_\_  
Driller: Jones W. Mason  
Date completed: 4-16-05

**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>Jeff Dowdy</u>                 | Latitude: <u>34.50.570</u> Longitude: <u>090.07.206</u>     |
| Mailing Address: <u>7823 misty meadows Dr</u> | Method of Lat/Long (circle one): <u>Conventional Survey</u> |
| <u>Herrando MS 38632</u>                      | USGS quad, <u>Hand-held GPS</u> Survey-grade GPS            |
| City State Zip Code                           | <u>NW 1/4 500 NW 11</u> Twn <u>3S</u> Rng <u>9W</u>         |
| Telephone No. <u>(901) 603 8865</u>           | Distance Direction Nearest Town                             |
|   | <u>1 1/2 Miles NE of Eudora</u>                             |

| Pump Type<br>Circle one                           | Power Type<br>Circle one                     |
|---|--|
| Air Lift Jet <u>Submersible</u>                   | Diesel Engine Gasoline Engine Natural Gas    |
| Bucket Piston Turbine                             | <u>Electric Motor</u> Hand Tractor PTO       |
| Centrifugal Rotary Flowing Well                   | Windmill Other (specify): _____              |
| Other (specify): _____                            | Horse Power Rating of Motor: <u>1 1/2 hp</u> |
| Date Pump Installed: <u>4-16-05</u>               | Setting Depth: <u>50'</u> feet               |
| Rated Pump Capacity: <u>18</u> Gallons Per Minute | Number of Stages: <u>14</u>                  |

| Pump Test Data   | Method of Measuring Water Level<br>Circle one           |
|--|---|
| Date Well Tested: <u>4-16-05</u>                           | Air Line Electric Measuring Line Steel Tape             |
| Static Water Level (A): <u>30</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>18</u> GPM with a drawdown of           |
| Test Pumping Rate: <u>18</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