

County: Desoto  
 Permit #: \_\_\_\_\_  
 Driller: James W. Masow  
 Date drilling completed: 5-29-05

### 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 #: K-211  
 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>Curtis Hooks</u>	Latitude: <u>34° 49' 28.4"</u> Longitude: <u>090° 03' 47.0"</u>
Mailing Address: <u>3819 Hwy 304 W</u>	Method of Lat/Long (circle one): <u>Hand-held GPS</u> Conventional Survey
<u>herodo</u> <u>ms</u> <u>38632</u>	USGS quad, <u>Hand-held GPS</u> Survey-grade GPS
City State Zip Code	NW 1/4 <u>NE</u> 1/4 Sec <u>16</u> Twn <u>35</u> Rng <u>8W</u>
Telephone No. <u>(901)-315-0895</u>	Distance <u>1.12</u> Miles Direction <u>E</u> Nearest Town <u>free corner</u>

**Well Data**

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

Date well drilling started: 5-29-05 Date well drilling completed: 5-29-05

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

Static Water Level: 60 feet above or below (circle one) land surface Date measured: 5-29-05

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

Hole depth: 185' Well depth: 185' Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 175 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 175 feet to 185 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. Masow 0-620  
 Print Name of Water Well Contractor and License No.

James W. Masow  
 Signature of Water Well Contractor

If well telescopes please sketch below and show depths.

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K-211

Ground Level

Description of Formations Encountered

From To

Description of Formations Encountered	From	To
clay dirt.	0	28
gravel	28	45
Blue clay	45	140
white sand	140	185

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.

N

304

W
E

house

well.

S

Landowner Name: Curtis Hooks

James W. Moore  
Signature of Water Well Contractor

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# 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 #: K-211  
 Elevation: \_\_\_\_\_

County: Desoto  
 Permit #: \_\_\_\_\_  
 Driller: Jones w. Mason  
 Date completed: 5-29-05

**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>Curtis Hooks</u> Mailing Address: <u>3819 Hwy 304 W</u> <u>hernado MS 38632</u> <small>City State Zip Code</small> Telephone No. <u>(901) 315-0895</u>	Latitude: <u>34.49.754</u> Longitude: <u>090.03.470</u> Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS <u>NW</u> ¼ <u>NE</u> ¼ Sec <u>16</u> Twn <u>35</u> Rng <u>8W</u> Distance Direction Nearest Town <u>1 1/2</u> Miles <u>E</u> of <u>freese corner</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet <input type="radio"/> <u>Submersible</u> Bucket Piston <input type="radio"/> Turbine <input type="radio"/> Centrifugal Rotary <input type="radio"/> Flowing Well <input type="radio"/> Other (specify): _____ Date Pump Installed: <u>5-29-05</u> Rated Pump Capacity: <u>12</u> Gallons Per Minute	Diesel Engine <input type="radio"/> Gasoline Engine <input type="radio"/> Natural Gas <input type="radio"/> <u>Electric Motor</u> <input type="radio"/> Hand <input type="radio"/> Tractor PTO <input type="radio"/> Windmill <input type="radio"/> Other (specify): _____ Horse Power Rating of Motor: <u>3/4</u> Setting Depth: <u>100'</u> feet Number of Stages: <u>11</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>5-29-05</u> Static Water Level (A): <u>60</u> Feet Below Land Surface Pumping Water Level (B): <u>NA</u> Feet Below Land Surface Drawdown [(B) - (A)]: <u>NA</u> Feet Below Land Surface Test Pumping Rate: <u>12</u> Gallons Per Minute Duration of Pump Test (minimum 4 hours): <u>24</u> hours	Air Line <input type="radio"/> Electric Measuring Line <input type="radio"/> Steel Tape <input type="radio"/> Other (specify): <u>string / weight</u> For flowing well, measured shut in head: <u>NA</u> feet Well yielded <u>12</u> GPM with a drawdown of <u>NA</u> feet after <u>24</u> hours of pumping

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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