

STATE WELL REPORT

442

County: Franklin
 Permit #: MS-GW-17577
 Driller: Walker-Hill Environmental, Inc.
 Date drilling completed: 12/16/21

Part 1
Driller's Log
 Mississippi Department of Environmental Quality
 Office of Land and Water Resources
 P.O. Box 2309
 Jackson, MS 39225-2309
 (601)961-5555
 (601)961-5228 (fax)

For Office Use Only:

Well #: P 168
 Aquifer: _____
 E-Log #: _____



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 <small>(Landowner if borehole is not for a water well)</small> | Well or Borehole Location |
|--|--|
| Owner Name: <u>Craig Fraiser</u> | Latitude: <u>31°25'18"</u> Longitude: <u>90°40'52"</u> |
| Mailing Address: <u>6910 Burt Jordan Rd. SE</u> | Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____ |
| <u>McCall Creek</u> <u>MS</u> <u>39467</u> | <u>NW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$, Sec <u>11</u> T <u>5N</u> R <u>5E</u> |
| City State Zip Code | <u>6.3</u> Miles <u>SSE</u> of <u>McCall Creek, MS</u> |
| Telephone No. (<u>601</u>) <u>734-2606</u> | (Distance) (Direction) (Nearest Town) |

Well / Borehole Data

Date drilling started: 7/21/21 Date drilling completed: 12/16/21 Hole depth: 207' Hole diameter: 8"
 Location of the source of any surface water used for drilling: N/A (Franklin County Water Association)
 Method of dosing and volume of Chlorine used in drilling and development: add bleach to water truck
 Logs run (check all applicable): log run Electric Gamma Ray Density Sonic Neutron Other: _____
 Name of organization running log(s): Teaco
 Purpose of borehole (check one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump Seismic Survey Other (describe) _____

If drilling is not related to water well construction, skip the remainder of this block

Purpose of Well (check all applicable): Home Industrial Public Supply Irrigation Fish Culture
 Other (describe): Commercial, Domestic (Home) Well
 If a flowing well, method of flow regulation: Valve N/A Other (describe) _____
 Static Water Level: 134.13 TOC feet above or below land surface Date measured: 12/20/21
 Method of measurement (check one) Steel tape Electric tape Air line Other (describe): _____
 Well depth: 180' Well grouted to a depth of: 150 feet Type of grout (check one) Neat Cement Bentonite Mix
 Casing length: 170 feet Casing diameter: 4 inches Type of casing: PVC
 Screen length: 10 feet Screen diameter: 4 inches Type of screen: SS
 Screen slot size: .010 inches Setting depth: From 170 feet to 180 feet
 Type of completion (check all applicable) gravel packed Underreamed Open hole Natural Development
 Other (describe): 10" Steel Surface casing 105' (screen 4"X6" Muni-Pac), (TOC 2.5' above ground)
 Top of lap pipe or reduction in casing: N/A feet

If telescoped or more than one screen, describe on next page

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)

County: Franklin
 Permit #: MS-GW-17577
 Driller: Walker-Hill Environmental
 Date completed: 12/16/21
Copy information from block on Part 1

For Office Use Only:

Well #: P 168

RECEIVED
12-29-2021

Aquifer: _____

BY OLWR

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 | Well Location |
|--|---|
| Owner Name: <u>Craig Fraiser</u> | Latitude: <u>31°25'18"</u> Longitude: <u>90°40'52"</u> |
| Mailing Address: <u>6910 Burt Jordan Rd SE</u> | Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____ |
| <u>McCall Creek</u> MS <u>39647</u> | NW <u>1/4</u> NW <u>1/4</u> , Sec <u>11</u> T <u>5N</u> R <u>5E</u> |
| City _____ State _____ Zip Code _____ | <u>6.3</u> Miles <u>SSE</u> of <u>McCall Creek</u> |
| Telephone No. (<u>601</u>) <u>734-2606</u> | (Distance) (Direction) (Nearest Town) |

Pump Type (check one)

Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe): _____

Date Pump Installed: 12/17/21 Rated Pump Capacity: 10 Gallons Per Minute

Is This Pump (check one): New Repaired Replacement

Power Type (check one)

Electric Diesel Gasoline Natural Gas Tractor PTO Windmill Other (describe): _____

Horse Power Rating of Motor: 1 Setting Depth: 169 feet Number of Stages: 12

Pump Test Data for Non Flowing Well

Date Well Tested: 12/20/21 Duration of Pump Test (minimum 4 hours): 24 hours

Static Water Level (A): 134.13 Feet Below Land Surface Pumping Water Level (B): 163.3 Feet Below Land Surface

Drawdown [(B) - (A)]: 29.17 Feet Below Land Surface Test Pumping Rate: 13 Gallons Per Minute

Method of measurement (check one): Steel tape Electric tape Air line Other (describe): _____

Pump Test Data for Flowing Well

Measured shut in head: N/A 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 (check one): New Repaired Replacement

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.

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

Gary P. Hill 0-578 _____
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer

Form: OLWR-SWR-2A (4/13)

Craig Fraiser Water Well

Abandoned Water Well

6935 Burt Jordan Rd

Granny's Corner

Bogue Chitto Rd

Burt Jordan Rd

Google

Imagery Date: 4/7/2016

31°25'15.83" N 90°40'47.82" W elev 449 ft