

# 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)

For Office Use Only:

Aquifer: \_\_\_\_\_

Well #: B-63

L. S. Elevation: \_\_\_\_\_

E-log #: \_\_\_\_\_

County: George

Permit #: \_\_\_\_\_

Driller: Michael S. Havard

Date drilling completed: 10-01-04

HAVARD DRILLING CO.

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>Thomas J. Nicholson</u>	Latitude: <u>30° 57' 46.9"</u> Longitude: <u>88° 38' 55.0"</u>
Mailing Address: _____	Method of Lat/Long (circle one): <u>Hand-held GPS</u> Conventional Survey, _____
<u>105 Bexley Road</u>	USGS quad, <u>Hand-held GPS</u> Survey-grade GPS
<u>Wucedale MS 39452</u>	<u>NE 1/4 SW 1/4 Sec 13 Twn T15 Rng R7W</u>
City State Zip Code	Distance Direction Nearest Town
Telephone No. <u>(601) 949-1571</u>	<u>2.5</u> Miles <u>NW</u> of <u>Wucedale</u>

**Well Data**

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

Date well drilling started: 10-01-04 Date well drilling completed: 10-01-04

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

Static Water Level: 43 feet above or below (circle one) land surface Date measured: 10-04-04

Method of Measurement (circle one) steel tape electric tape air line other: \_\_\_\_\_

Hole depth: 100 Well depth: 100 Well grouted to a depth of 16 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 80 feet Casing diameter: 4 inches Type of casing: BE PUL 540

Screen length: 20 feet Screen diameter: 4 inches Type of screen: WOP PUL

Screen slot size: .008 inches Setting depth: From 80 feet to 100 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: \_\_\_\_\_ 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.

Michael S. Havard 0-673

Print Name of Water Well Contractor and License No.

Michael S. Havard

Signature of Water Well Contractor

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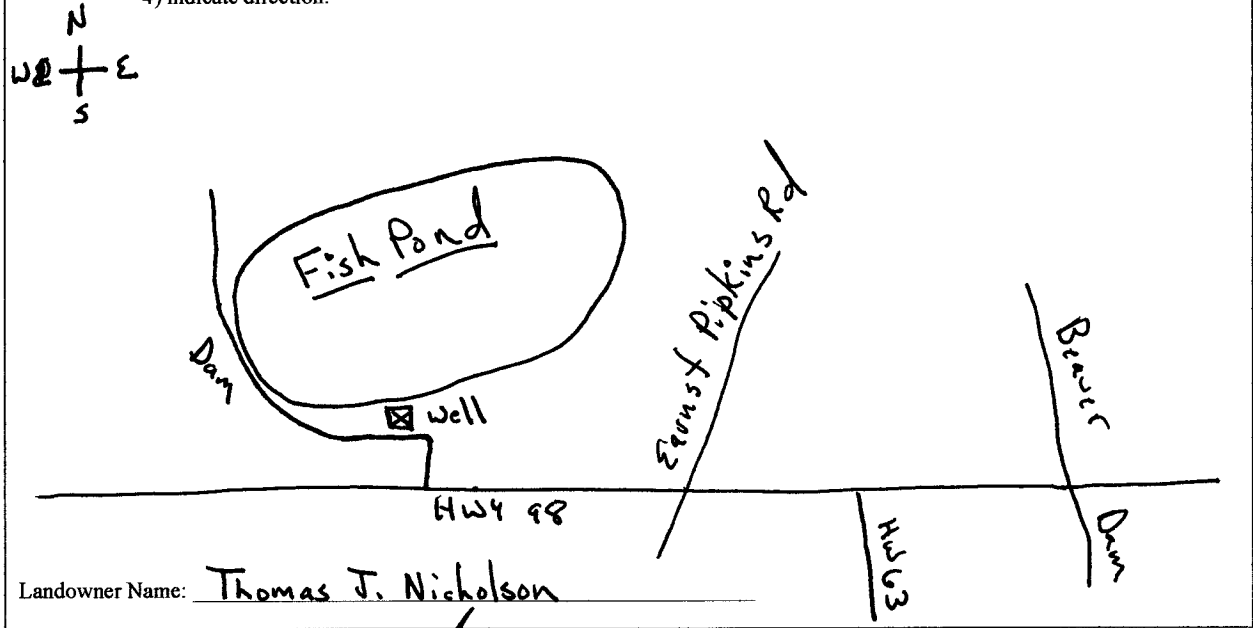
If well telescopes please sketch below and show depths.

Ground Level B-63

Description of Formations Encountered	From	To
Topsand	brown	0 3
Sand, fine to med	brown	3 12
Silt	brown	12 22
Clay	brown	22 25
Sand, fine to med	brown	25 28
Clay	Pink	28 31
Sand, med	Pink	31 45
Sand, fine to med	Pink	45 48
Sand, med	Pink	48 83
Sand, med	Brown	83 100
Clay	yellow	- 100 -

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.



[Signature]  
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)

County: George  
 Permit #: \_\_\_\_\_  
 Driller: Michael S. Howard  
 Date completed: 9-04-04

For Office Use Only:

Aquifer: \_\_\_\_\_  
 Well #: B-63  
 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	Well Location
Owner Name: <u>Thomas J. Nicholson</u>	Latitude: <u>30°57.669</u> Longitude: <u>88°38.556</u>
Mailing Address: _____ <u>105 Bexley Rd</u> <u>Lucedale MS 39452</u> <small>City State Zip Code</small>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>Hand-held GPS</u> Survey-grade GPS _____ ¼ _____ ¼ Sec <u>13</u> Twn <u>T1S</u> Rng <u>R7W</u>
Telephone No. <u>(601) 947-1571</u>	Distance Direction Nearest Town <u>2.5</u> Miles <u>WW</u> of <u>Lucedale</u>

Pump Type Circle one	Power Type 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>3hp</u>
Date Pump Installed: <u>9-04-04</u>	Setting Depth: <u>100</u> feet
Rated Pump Capacity: <u>55</u> Gallons Per Minute	Number of Stages: <u>7</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>10-01-04</u>	<u>Air Line</u> Electric Measuring Line Steel Tape
Static Water Level (A): <u>43</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>60</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>17</u> Feet Below Land Surface	Well yielded <u>90</u> GPM with a drawdown of
Test Pumping Rate: <u>90</u> Gallons Per Minute	<u>17</u> feet after <u>5</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>5</u> hours	

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

Michael S. Howard 0-673 \_\_\_\_\_  
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

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West FOREST

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30° 57' 40"N, 88° 38' 33"W (WGS84/NAD83)

USGS **Merrill** Quad

View *TopoZone Pro* aerial photos, shaded relief, street maps, interactive coordinate display, and elevation data

**USGS Topo Maps**

- 1:24K/25K Series
- 1:100K Series
- 1:250K Series

**Map Size**

- Small
- Medium
- Large

**View Scale**

1 : 50,000

Update Map

**Coordinate Format**

D/M/S

**Coordinate Datum**

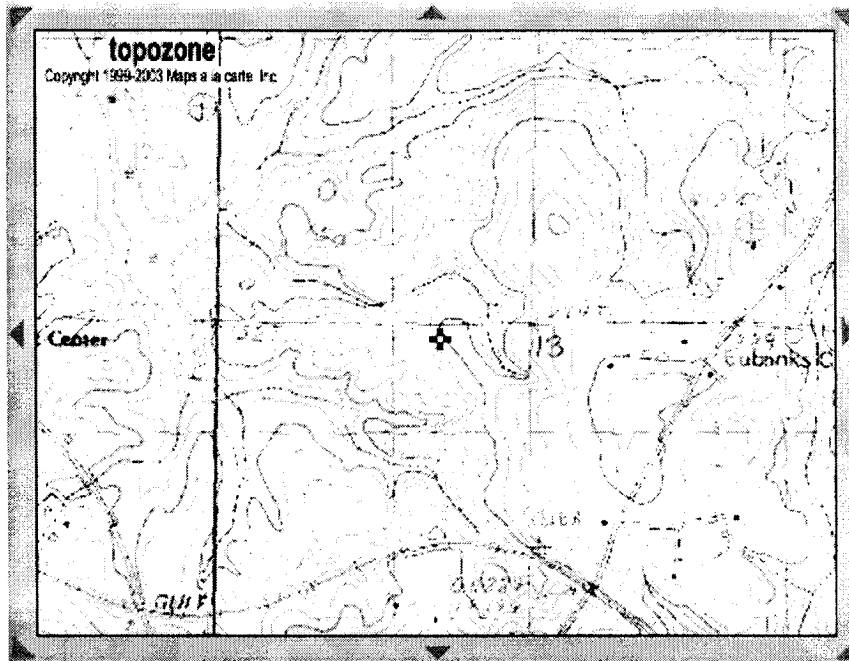
WGS84/NAD83

Show target

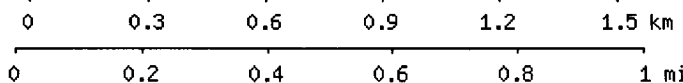
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George  
B-63



M=-0.509  
 G=-0.845  
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