

# 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 #: E-110  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: George  
Permit #: \_\_\_\_\_  
Driller: Coast Water Wells, Inc.  
Date drilling completed: 11-8-07

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>Catherine Minnon</u>	Latitude: <u>30° 49' 24.3"</u> Longitude: <u>88° 46' 14.2"</u>
Mailing Address: <u>Hwy 57</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u> , USGS quad, <u>Hand-held GPS</u> Survey-grade GPS
<u>Berndale, MS 39452</u> City State Zip Code	<u>SW 1/4 SE 1/4 Sec 34 Twn T25 Rng R8W</u>
Telephone No. <u>601-831-2853</u>	Distance <u>3 1/2</u> Miles <u>SOUTH</u> Direction of <u>Berndale</u> Nearest Town

### Well Data

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

Date well drilling started: 11-8-07 Date well drilling completed: 11-8-07

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

Static Water Level: 55 feet above or below (circle one) land surface Date measured: 11-8-07

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

Hole depth: 270 FT Well depth: 270 FT Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 260 feet Casing diameter: 2 inches Type of casing: PVC

Screen length: 10 feet Screen diameter: 2 inches Type of screen: PVC

Screen slot size: .008 inches Setting depth: From 260 feet to 270 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: N/A 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): N/A

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.

Jack Ridgell 0-472  
Print Name of Water Well Contractor and License No.

Jack Ridgell  
Signature of Water Well Contractor



# 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 #: E-110

Elevation: \_\_\_\_\_

County: George  
 Permit #: \_\_\_\_\_  
 Driller: Coast Water Wells RV.  
 Date completed: 11-8-07

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

Owner Name: Catherine Minnon  
 Mailing Address: Hwy 57  
Benndale, Ms 39452  
City State Zip Code  
 Telephone No. 601 831-2853

### Well Location

Latitude: 30° 49' 24.3" Longitude: 088° 46' 14.2"  
 Method of Lat/Long (circle one): Conventional Survey,  
 USGS quad, Hand-held GPS, Survey-grade GPS  
SW 1/4 SE 1/4 Sec 34 Twn T25 Rng R8W  
 Distance Direction Nearest Town  
3 1/2 Miles South of Benndale

### Pump Type Circle one

Air Lift  Jet  Submersible  
 Bucket  Piston  Turbine  
 Centrifugal  Rotary  Flowing Well  
 Other (specify): \_\_\_\_\_  
 Date Pump Installed: 11-9-07  
 Rated Pump Capacity: 7.5 Gallons Per Minute

### Power Type Circle one

Diesel Engine  Gasoline Engine  Natural Gas   
 Electric Motor  Hand  Tractor PTO  
 Windmill  Other (specify): \_\_\_\_\_  
 Horse Power Rating of Motor: 1HP  
 Setting Depth: 80FT. Droppipe feet  
 Number of Stages: 2

### Pump Test Data

Date Well Tested: 11-9-07  
 Static Water Level (A): 55 Feet Below Land Surface  
 Pumping Water Level (B): N/A Feet Below Land Surface  
 Drawdown [(B) - (A)]: N/A Feet Below Land Surface  
 Test Pumping Rate: 7.5 Gallons Per Minute  
 Duration of Pump Test (minimum 4 hours): 5 1/2 hours

### Method of Measuring Water Level Circle one

Air Line  Electric Measuring Line  Steel Tape  
 Other (specify): \_\_\_\_\_  
 For flowing well, measured shut in head: N/A feet  
 Well yielded 7.5 GPM with a drawdown of  
N/A feet after N/A hours of pumping

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

Jack Rickadell 0-472  
 Print Name of Pump Installer and License No. (if applicable)

[Signature]  
 Signature of Pump Installer