

State Well Report

Part 1 - Driller's Log

Mississippi Department of Environmental Quality

Office of Land and Water Resources

P.O. Box 2309

Jackson, MS 39225

(601)961-5210

(601)961-5228 (fax)

For Office Use Only:

Aquifer: _____

Well #: B 23

L. S. Elevation: _____

E-log #: _____

County: Green

Permit #: _____

Driller: David L. Cain

Date drilling completed: 3/30/2018

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 #1

Information on Well Owner

(Landowner if borehole is not for a water well)

Owner Name: Daniel Smith

Mailing Address: 1945 Red Hill Rd

Rehden MS 39476
City State Zip Code

Telephone No. (601) 410-6082

Well or Borehole Location

Latitude: 31° 29' 25" Longitude: 88° 41' 54"

Method of Lat/Long (circle one): Hand-held GPS Conventional Survey

USGS quad Hand-held GPS Survey-grade GPS

SE 1/4 E 1/4 Sec 9 Twn 5N Rng 7W

Distance 3.5 Miles Direction West of Nearest Town Piquette MS

Well / Borehole Data

Date drilling started: 3/26 Date drilling completed: 3/30 Hole depth: 220 Hole diameter: 4"

Location of the source of any surface water used for drilling: Piquette Comm. Water System
Method of dosing and volume of Chlorine used in drilling and development: _____

Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: _____
Name of organization running log(s): _____

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 one): Home _____ Industrial Public Supply _____ Irrigation _____ Fish Culture _____ Other: Chicken Farm

If a flowing well, method of flow regulation: Valve _____ Other (describe) _____

Static Water Level: 80 feet above or below (circle one) land surface Date measured: 3/29/2018

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

Well depth: 220 Well grouted to a depth of 20 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 180 feet Casing diameter: 4" inches Type of casing: PVC

Screen length: 40 feet Screen diameter: 2" inches Type of screen: PVC

Screen slot size: #10 inches Setting depth: From 180 feet to 220 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: 170' feet. If telescoped or more than one screen, describe on next page

Southern MS Water Well Drilling
0-631

Form: OLWR-SWR-1A (04/08)
Randall Cain
4-8-2018

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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 2309
 Jackson, MS 39225
 (601)961-5210
 (601)961-5228 (fax)

For Office Use Only:

Aquifer: _____

Well #: B23

Elevation: _____

County: Green

Permit #: _____

Driller: David L. Cain

Date completed: 3/30/2018

Copy information from block on Part 1

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

Owner Name: Daniel Smith

Mailing Address: 1945 Red Hill Rd

Richman Ms 39476
 City State Zip Code

Telephone No. (601) 410-6082

Well Location

Latitude: 31°29'25" Longitude: 88°41'54"

Method of Lat/Long (check one): Conventional Survey _____

USGS quad _____, Hand-held GPS , Survey-grade GPS _____

S ^{SE}/₄ E ^{SW}/₄ Sec 9 T 5 N R 7 W

Distance Direction Nearest Town

3.5 Miles West of Piave Ms

Pump Type
Circle one

Air Lift Jet Submersible
 Bucket Piston Turbine
 Centrifugal Rotary Flowing Well

Other (specify): _____

Date Pump Installed: 3/29/2018

Rated Pump Capacity: 30 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: _____

Setting Depth: 140'

Number of Stages: 15

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Pump Test Data

Date Well Tested: 3/29/2018
 Static Water Level (A): 80 Feet Below Land Surface
 Pumping Water Level (B): 130 Feet Below Land Surface
 Drawdown [(B)-(A)]: 50 Feet Below Land Surface
 Test Pumping Rate: 50 Gallons Per Minute
 Duration of Pump Test (minimum 4 hours): 4 hours

Method of Measuring Water Level
Circle one

Air Line Electric Measuring Line Steel Tape
 Other (specify): _____

For flowing well, measured shut in head: _____ feet

Well yielded 50 GPM with a drawdown of

50 feet after 4 hours of pumping

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

Southern Ms Water Well Drilling
 Print Name of Pump Installer and License No. (if applicable)

David L. Cain
 Signature of Pump Installer

D-831

Form: OLWR-SWR-1B (04/08)

4/8/2018

Well 1

