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)

County: Hinds
Permit #: 4" well
Driller: Water well service
Date drilling completed: 1-21-05

For Office Use Only:
Aquifer:
Well #: C-74
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

Owner Name: Charles Anderson
Mailing Address: 138 Lorman Lane
Madison Ms 39110
City State Zip Code
Telephone No. (601) 853-7070

Well Location

Latitude: 32 . 26 . 02" Longitude: 90 . 16 . 20"
Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
NE ¼ SW ¼ Sec 23 Twn 7N Rng 1W
Distance 6 Miles Direction N of Nearest Town Jackson

Well Data

Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other:
Date well drilling started: 1-10-05 Date well drilling completed: 1-21-05
If flowing, method of flow regulation: Valve Other (describe)
Static Water Level: 206 feet above or below (circle one) land surface Date measured: 1-20-05
Method of Measurement (circle one) steel tape electric tape air line other:
Hole depth: 590 Well depth: 580 Well grouted to a depth of 40 feet
Type of grout (circle one): Cement Bentonite Mix
Casing length: 560 feet Casing diameter: 300' of 4" 260' of 3" inches Type of casing: PVC
Screen length: 20 feet Screen diameter: 3" inches Type of screen: PVC
Screen slot size: 0.08 inches Setting depth: From 560 feet to 580 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: 300 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): State Logger # C-0074

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.

Arnold Finchy Sr 0598
Print Name of Water Well Contractor and License No.

Arnold Finchy Sr
Signature of Water Well Contractor

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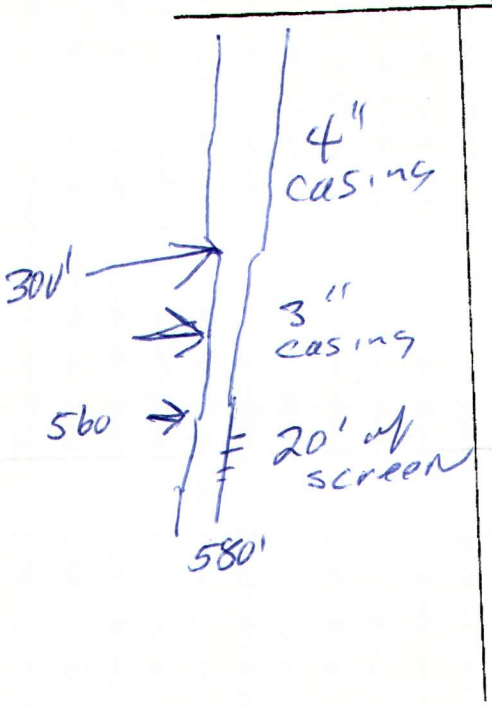
If well telescopes please sketch below and show depths.

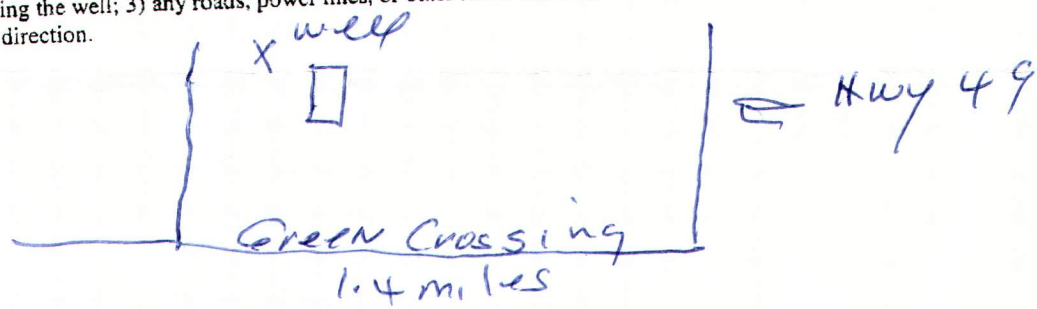
Ground Level C-74



Description of Formations Encountered	From	To
Surface Sandy Clay	0	20
Yazoo Clay	20	390
Sand	390	410
Sandy Clay	410	560
Sand	560	580

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.



Landowner Name: Charles Anderson

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Donald Zeeh Sr

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)

County: Hinds
Permit #: 4" well
Driller: Water well Service
Date completed: 1-22-05

For Office Use Only:
Aquifer:
Well #: C-74
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

Owner Name: Charles Anderson
Mailing Address: 138 Lorman Lane
Madison, Ms 39110
City State Zip Code
Telephone No. (601) 853-7070

Well Location

Latitude: 322602 N Longitude: 901620 W
Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
NE ¼ SW ¼ Sec 23 Twn 7N Rng 1W
Distance 6 Miles Direction N of Nearest Town Jackson

Pump Type
Circle one

Air Lift, Jet, (Submersible), Bucket, Piston, Turbine, Centrifugal, Rotary, Flowing Well
Other (specify):
Date Pump Installed: 1-22-05
Rated Pump Capacity: 16 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: 1.0
Setting Depth: 300 feet
Number of Stages: 9

Pump Test Data

Date Well Tested: 1-22-05
Static Water Level (A): 206 Feet Below Land Surface
Pumping Water Level (B): 240 Feet Below Land Surface
Drawdown [(B) – (A)]: 34 Feet Below Land Surface
Test Pumping Rate: 15 Gallons Per Minute
Duration of Pump Test (minimum 4 hours): 5 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 _____ GPM with a drawdown of _____ feet after _____ hours of pumping

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

Arnold Finchor Sr 0598
Print Name of Pump Installer and License No. (if applicable)

Arnold Finchor Sr
Signature of Pump Installer

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FEB 02 2005
BY: OLWR