]		For Office Use Only:				
County: HOLMES		Report and Well Log nent of Environmental Quality	Aquifer:				
Permit #: 60 16346	Office of Lan	d and Water Resources	Well #: J-68				
Duillous LAVAIE CENTEDAL		D. Box 10631 , MS 39289-0631	I C Floretian				
Driller: LAYNE-CENTRAL		1) 961-5210	L. S. Elevation:				
Date Drilling Completed: 4/13/05		354-6938 (fax)	E-Log #:				
State Law requires that this report be prepared by the driller in detail and filed with the Department within							
Information on Well Own	30 days of completion of drilling of the well. Information on Well Owner						
(Landowner if borehole is not for a		Well or Borehole Location					
Owner Name WEST HOLMES WATER ASSOCIATION		Latitude: 33 ° 07 ' 262 " Longitude: 90 ° 18 ' 045 "					
Mailing Address: PO BOX 586	Method of Lat/Long (circle one)		: Conventional Survey				
	USGS quad, Hand-Held		GPS, Survey-grade GPS				
	MS 39169	SW 1/4 NE 1/4 Sec 28	Twn 15N V Rng 1W				
City	City State Zip Code Sistance		on Nearest Town				
Telephone No. (<u>601</u>) <u>235-5923</u>		Miles	of				
	Well	Data					
Purpose of Well (Check one): Home Industrial Public Supply 🗸 Irrigation Fish Culture Other:							
Date well drilling started: 1/10/05 Date well drilling completed: 4/13/05							
If flowing, method of flow regulation: Valve 8" Other (describe)							
Static Water Level: FLOWS 1000 GPM feet above or below (circle one) land surface Date Measured: 4/13/05							
Method of Measurement (circle one) steel tape electric tape air line Other:							
Hole depth: 1575' We	ll depth: 1570'	Well grouted to a depth	n of: 1498' feet				
Type of grout (circle one):	nent Bent	onite Mix	7.				
Casing length: 1498 feet	Casing diameter:	inches Type of c	casing: STEEL				
Screen length: 60 feet	Screen diameter:	8 inches Type of s	screen: STAINLESS STEEL				
Screen slot size: 0.020 inches	Se	tting depth: From 1510	feet to 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: 1423 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): LAYNE-CENTRAL, JACKSON, MS							
I certify that the well was drilled, constructed and completed in accordance with applicable requirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations and state laws.							

DAVE COOK

Print Name of Water Well Contractor and License No.

692

RECEIVED

Signature of Water Well Contractor

JUL 0 5 2005

BY: OLWR

J: 68

Description of Formations Encountered	From	To
BROWN CLAY	0	12
SAND & SMALL GRAVEL	12	65
COARSE SAND & GRAVEL	65	105
FINE SAND & GRAVEL	105	136
SANDY CLAY	136	168
SAND & LIGNITE	168	190
BROWN CLAY	190	230
HARD CLAY	230	240
SANDY CLAY	240	320
SAND & SHALE STREAKS	320	365
CLAY & SAND STREAKS	365	460
CLAY	460	505
SAND	505	605
SAND & SHALE STREAKS	605	647
HARD CLAY	647	682
SAND & CLAY STREAKS	682	820
CLAY & SHALE STREAKS	820	1015
ROCK	1015	1017
HARD SHALE	1017	1024
ROCK	1024	1026
HARD SHALE	1026	1070
SAND	1070	1100
CLAY & HARD SHALE	1100	1185
HARD SHALE	1185	1260
SAND & SHALE STREAKS	1260	1370
HARD SHALE	1370	1392
SAND & CLAY STREAKS	1392	1470
SAND	1470	1600
HARD SHALE	1600	1610

If more than one screen, show location of each on sketch.

Ground Level

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.

NORTH

Landowner's Name: WEST HOLMES WATER ASSOCIATION

NOT TO SCALE

Signature of Water Well Contractor

State Well Report

		•	Part 2	For Of	fice Use Only:	
County:	HOLMES		's Completion Report	Quality		
Mississippi Departme		and Water Resources				
		Box 10631	7 iquilor.	- 10		
Driller: LA	AYNE-CENTRAL	CV 2 C 1	MS 39289-0631	Well #:	-68	
		_) 961-5210			
			54-6938 (fax)	Elevation:		
This part of the report must be completed by the pump installer in detail and filed with the Department within 30 days of the						
		eted by the pump installe of this report must be at		th the Department with	iin 30 days of the	
instanation of	Well Owner Informa	tached to this report.	Well Location			
Owner Name WEST HOLMES WATER ASSOCIATION		Latitude: 33 ° 07 ' 12 " Longitude: 90 ° 17 ' 53 "				
Mailing Address: PO BOX 586		Method of Lat/Long (check one): Conventional Survey ✓				
		USGS quad Hand-Held GPS Survey-grade GPS				
	TCHULA	MS 39169	SW 1/4 NE 1/4	Sec 28 T 1	5N R 1W	
	City	State Zip Code	Distance	Direction	Nearest Town	
T. 1. 1						
Telephone No.	(_601_)_235-5923		6 Miles	SW of	TCHULA	
	Pump Type			Power Type		
	Circle One		237	Circle One		
Air Lift	Jet	Submersible	Diesel Engine	Gasoline Engine	Natural Gas	
Bucket	Piston	Turbine	Electric Motor	Hand	Tractor PTO	
Centrifugal	Rotary	Flowing Well	Windmill	Other (specify):		
Other (specify): FLOWING WELL		Horse Power Rating o	f Motor:	20		
Date Pump Installed: 10/26/06		Setting Depth:	50	feet		
Rated Pump Capa	city 400	Gallons Per Minute	Number of Stages:	4		
Pump Test Data		Method of Measuring Water Level Circle One				
Date Well Tested:	10/26/06		Air Line E	Electric Measuring Line	Steel Tape	
Static Water Level	1 (A): 58+ Fo	eet Below Land Surface	Other (specify):			
Pumping Water Le	evel (B): Fe	eet Below Land Surface				
Drawdown [(B) -	(A)]: 0 F	Feet Below Land Surface For flowing well, measured shut in head: 58+ feet				
Test Pumping Rate	Test Pumping Rate: 431 Gallons Per Minute Well yielded 431 GPM with a drawdown of					
Duration of Pump Test (minimum 4 hours): 8 hours (NET) 0 feet after 8 hours of pumping						
I hereby certify that the above statements are true to the best of my knowledge.						
DAVE COOK 692 Wind Cook						
Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer						
				net	LIVED	

DEC 0 6 2006 BY: OLWR