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### STATE WELL REPORT

#### Part I

#### Driller's Log

Mississippi Department of Environmental Quality  
Office of Land and Water Resources  
P.O. Box 2309  
Jackson, MS 39225-2309  
(601)961-5210  
(601)360-0535 (fax)

#### For Office Use Only:

Well #: 12165  
Aquifer: \_\_\_\_\_  
E-Log #: \_\_\_\_\_

County: Holmes  
Permit #: GW 17289  
Driller: Al Jones  
Date drilling completed: 9/10/17

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 Owner Information (Landowner if borehole is not for a water well)	Well or Borehole Location:
Owner Name: <u>Ebenezer Water Assn.</u>	Latitude: <u>32° 58' 18.13"</u> Longitude: <u>90° 05' 15.72"</u>
Mailing Address: <u>619 Hwy 14</u>	Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
<u>Lexington MS 39095</u>	<u>NW 1/4 SW 1/4, Sec 15 T 13N R 02E</u>
City State Zip Code	<u>560 feet east of Ebenezer Rd on Hwy 14</u>
Telephone No. (662) <u>834-3396</u>	(Distance) (Direction) (Nearest Town)

e logs gps loc more accurate

**Well / Borehole Data**

Date drilling started: 3-10-17 Date drilling completed: 9-10-17 Hole depth: 1520' Hole diameter: 12"

Location of the source of any surface water used for drilling: Ebenezer Water System

Method of dosing and volume of Chlorine used in drilling and development: Granular Chlorine

Logs run (circle all applicable): No log run  Electric  Gamma Ray  Density  Sonic  Neutron  Other: \_\_\_\_\_

Name of organization running log(s): Teaco

Purpose of borehole (circle 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 (circle all applicable): Home  Industrial   Public Supply  Irrigation  Fish Culture

Other (describe): \_\_\_\_\_

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

Static Water Level: 165' feet (above or  below) land surface (circle one) Date measured: 9-10-17

Method of measurement (circle one): Steel tape  Electric tape  Air line  Other (describe): \_\_\_\_\_

Well depth: 1460 Well grouted to a depth of: 1395' feet Type of grout (circle one): Neat Cement  Bentonite  Mix

Casing length: 1400 feet Casing diameter: 16 inches Type of casing: Steel

Screen length: 50 feet Screen diameter: 10 inches Type of screen: S.S. Rod Bound

Screen slot size: .025 inches Setting depth: From 1405 feet to 1455 feet

Type of completion (circle all applicable):  Gravel packed  Underreamed  Open hole  Natural Development

Other (describe): \_\_\_\_\_

Top of lap pipe or reduction in casing: 1345' feet

*If telescoped or more than one screen, describe on next page*

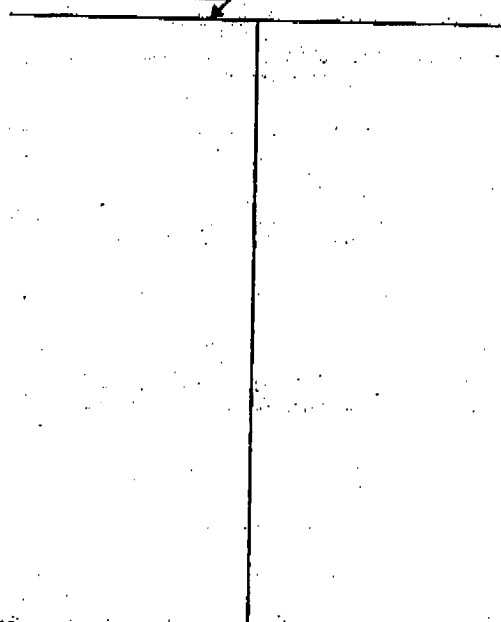
County: Holmes  
 Permit #: 6W17289

**For Office Use Only:**  
 Well #: V0024

The sketch below only required for water wells

If well telescopes, show depths on sketch.

Ground Level  $\rightarrow$



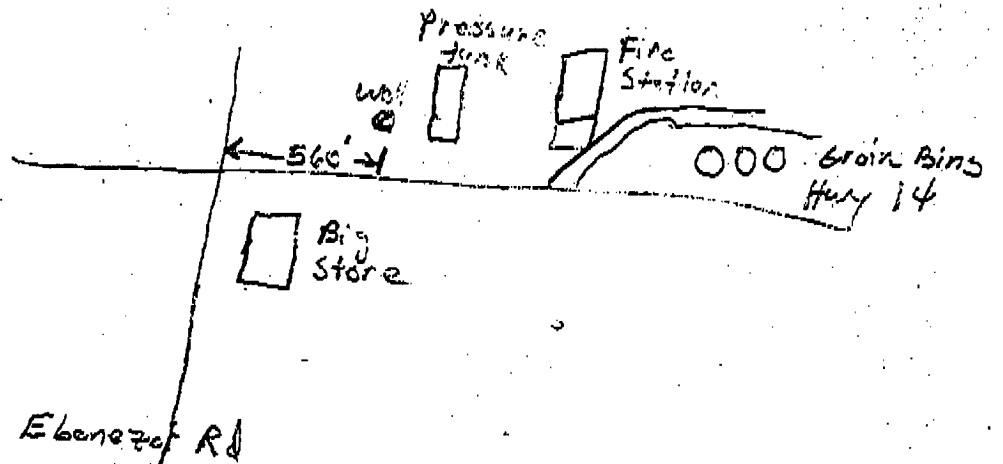
Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth)	To (depth)
Clay	Ground level	19'
Sandy Clay	19'	50'
Coarse Sand	50'	229'
Sand with Shale	229'	340'
Shale with sand streaks	340'	525'
Sand with shale	525'	833'
Hard Shale	833'	984'
Sandy Shale	984'	1058'
Shale and Rock	1058'	1119'
Limestone with shale	1119'	1238'
Shale	1238'	1370'
Sand	1370'	1471'
shale	1471'	1520'

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) north arrow



Landowner Name: \_\_\_\_\_

I HEREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state laws.

Clayton Miller O-703  
 Print Name of Responsible Licensee and License No.

4-2-18  
 Date

Clayton Miller  
 Signature of Licensee

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### STATE WELL REPORT

County: Holmes  
 Permit #: GW 17289  
 Driller: Al Jones  
 Date completed: \_\_\_\_\_  
*Copy information from block on Part 1*

**Part 2**  
**Pump Installer's Completion Report**  
 Mississippi Department of Environmental Quality  
 Office of Land and Water Resources  
 P.O. Box 2309  
 Jackson, MS 39225-2309  
 (601)961-5210  
 (601) 360-0535 (fax)

**For Office Use Only:**  
 Well #: 10024  
 Aquifer: \_\_\_\_\_

*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	Well Location
Owner Name: <u>Ebenezer Water Assn</u>	Latitude: <u>32° 58' 16.3"</u> Longitude: <u>90° 05' 18"</u>
Mailing Address: _____ <u>619 Hwy 14</u>	Method of Lat/Long (check one): <u>Conventional Survey</u> <sup>15.72</sup> <u>18.13</u>
<u>Lexington</u> <u>MS</u> <u>39075</u>	USGS quad _____ Hand-held GPS _____ Survey-grade GPS _____
City State Zip Code	_____ 1/4 _____ 1/4, Sec _____ T _____ R _____
Telephone No. ( ) _____	<u>560</u> <u>feet</u> <u>east</u> of <u>Ebenezer Assn Hwy 14</u> (Distance) (Direction) (Nearest Town)

**Pump Type (circle one)**  
 Submersible  Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe): \_\_\_\_\_  
 Date Pump Installed: 2-15-18 Rated Pump Capacity: 300 Gallons Per Minute  
 Is This Pump (circle one):  New Repaired Replacement

**Power Type (circle one)**  
 Electric Diesel Gasoline Natural Gas Tractor PTO Windmill Other (describe): \_\_\_\_\_  
 Horse Power Rating of Motor: 50 Setting Depth: 340 feet Number of Stages: 11

**Pump Test Data for Non Flowing Well**  
 Date Well Tested: 3-30-18 Duration of Pump Test (minimum 4 hours): 4 hours  
 Static Water Level (A): 16.5 Feet Below Land Surface Pumping Water Level (B): 28.9 Feet Below Land Surface  
 Drawdown [(B) - (A)]: 12.4 Feet Below Land Surface Test Pumping Rate: 300 Gallons Per Minute  
 Method of measurement (circle one): Steel tape  Electric tape Air line Other (describe): \_\_\_\_\_

**Pump Test Data for Flowing Well**  
 Measured shut in head: 400 feet.  
 Well yielded 326 GPM with a drawdown of 13.3 feet after 4 hours of pumping

**Meter Installation**  
 Meter Manufacturer: McCrometer Meter Serial Number: 20171327-06  
 Meter Model Number/Name: M104 Type of Meter: Propeller  
 Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): gal x 1000  
 Installation Date: 2-15-18 Meter installed by: Mid South Water  
 Is This Meter (circle one):  New Repaired Replacement  
*Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.*

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.  
Clayton Miller 0-703 4-2-18 Clayton Miller  
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer