

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 #: A 155
L. S. Elevation: _____
E-log #: _____

County: Jackson
Permit #: 0-780
Driller: J-Pierre
Date drilling completed: 4-8-13

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.

Information on Well Owner

(Landowner if borehole is not for a water well)

Owner Name: Chad Overstreet

Mailing Address: 2300 Belton Rd

Vanderbon MS 39555
City State Zip Code

Telephone No. (228) 826-4010

Well or Borehole Location

Latitude: 30° 41' 43.6" Longitude: 98° 44' 45.1"

Method of Lat/Long (circle one): Conventional Survey

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

SE 1/4 NE 1/4 Sec 23 Twn 45 Rng 8W

Distance 7 Miles Direction North of Nearest Town Vanderbon, MS

Well / Borehole Data

Date drilling started: 4-8-13 Date drilling completed: 4-8-13 Hole depth: 80 Hole diameter: 2

Location of the source of any surface water used for drilling: Aquifer, MS
Method of dosing and volume of Chlorine used in drilling and development: 2000 water tapal chlor

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: _____

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

Static Water Level: 3 feet above or below (circle one) land surface Date measured: 4-8-13

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

Well depth: 80 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 70 feet Casing diameter: 2 inches Type of casing: 2 1/2" 40 Plastic

Screen length: 10 feet Screen diameter: 2 inches Type of screen: 2 1/2" 40 Plastic

Screen slot size: 10 inches Setting depth: From 0 feet to 80 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: _____ feet. If telescoped or more than one screen, describe on next page

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

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BY: OLWR

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)

County: Jackson
 Permit #: 0-780
 Driller: J-Pierce
 Date completed: 4-8-13
Copy information from block on Part 1

For Office Use Only:

Aquifer: _____
 Well #: A155
 Elevation: _____

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: Chad Overstreet
 Mailing Address: 2300 Pulho Rd
Vandeventer MS 39555
 City State Zip Code
 Telephone No. 228 826 4010

Well Location

Latitude: 30-41-436 Longitude: 88-44-451
 Method of Lat Long (check one): Conventional Survey _____
 USGS quad _____ Hand-held GPS Survey-grade GPS _____
SE NE Sec 23 T 45 R BW
 Distance Direction Nearest Town
7 Miles north of Vandeventer, MS

Pump Type
Circle one

Air Lift Jet Submersible
 Bucket Piston Turbine
 Centrifugal Rotary Flowing Well
 Other (specify): _____
 Date Pump Installed: 4-8-13
 Rated Pump Capacity: 10 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
 Setting Depth: 40 Jet line feet
 Number of Stages: 2

Pump Test Data

Date Well Tested: 4-8-13
 Static Water Level (A): 3 Feet Below Land Surface
 Pumping Water Level (B): 40 Feet Below Land Surface
 Drawdown [(B) - (A)]: 2 Feet Below Land Surface
 Test Pumping Rate: 10 Gallons Per Minute
 Duration of Pump Test (minimum 4 hours): 48 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 10 GPM with a drawdown of
2 feet after 48 hours of pumping

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

Joel Pierce 0-780 APR 26 2013
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer BY: OLWR
 Form: OLWR-SWR-7B (04/08)

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