

# 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)

### For Office Use Only:

Aquifer: \_\_\_\_\_  
Well #: 6217  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: Jackson  
Permit #: \_\_\_\_\_  
Driller: Card Water Wells, Inc.  
Date drilling completed: 11/3/11

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                     | Well Location  |
|--|--|
| Owner Name: <u>William Stewart</u>         | Latitude: <u>30° 33' 46.00"</u> Longitude: <u>88° 33' 36.72"</u>                       |
| Mailing Address: <u>3050 Ed Parker Rd.</u> | Method of Lat/Long (circle one): Conventional Survey, _____                            |
| <u>Miss Point, MS 39562</u>                | USGS quad: <u>Hand-held GPS</u> , Survey-grade GPS <input checked="" type="checkbox"/> |
| City State Zip Code                        | <u>SW</u> 1/4 <u>NE</u> 1/4 Sec <u>41</u> ✓ Twn <u>T55N</u> Rng <u>R6W</u>             |
| Telephone No. <u>601-588-6654</u>          | Distance <u>5</u> Miles Direction <u>SOUTH</u> of Nearest Town <u>WADSWORTH</u>        |

### Well Data

Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other: \_\_\_\_\_

Date well drilling started: 11/2/11 Date well drilling completed: 11/3/11

If flowing, method of flow regulation: Valve N/A Other (describe) \_\_\_\_\_

Static Water Level: 25 feet above or below (circle one) land surface Date measured: 11/3/11

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

Hole depth: 203 FT Well depth: 203 FT Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 193 feet Casing diameter: 2 inches Type of casing: PVC

Screen length: 10 feet Screen diameter: 2 inches Type of screen: PVC

Screen slot size: .004 inches Setting depth: From 193 feet to 203 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: N/A 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): N/A

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.

Jack Ridgell 0-472  
Print Name of Water Well Contractor and License No.

Jack Ridgell  
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)

**For Office Use Only:**

Aquifer: \_\_\_\_\_

Well #: G217

Elevation: \_\_\_\_\_

County: Jackson  
 Permit #: \_\_\_\_\_  
 Driller: Coast Water Well Serv.  
 Date completed: 11/3/11

**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                             | Well Location   |
|--|---|
| Owner Name: <u>William Stewart</u>                 | Latitude: <u>30° 33' 46.02"</u> Longitude: <u>088° 33' 34.72"</u>   |
| Mailing Address: <u>3050 Ed Parker Rd.</u>         | Method of Lat/Long (circle one): Conventional Survey,<br>USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS |
| <u>Miss Point, MS 39562</u><br>City State Zip Code | <u>SW</u> ¼ <u>NE</u> ¼ Sec <u>41</u> Twn <u>T5S</u> Rng <u>R6W</u>   |
| Telephone No. <u>228-588-6654</u>                  | Distance Direction Nearest Town<br><u>5</u> Miles <u>South</u> of <u>WADE</u>                               |

| Pump Type<br>Circle one   | Power Type<br>Circle one   |
|---|--|
| Air Lift <input type="radio"/> Jet <input checked="" type="radio"/> Submersible | Diesel Engine Gasoline Engine Natural Gas  |
| Bucket <input type="radio"/> Piston <input type="radio"/> Turbine               | <input checked="" type="radio"/> Electric Motor <input type="radio"/> Hand <input type="radio"/> Tractor PTO |
| Centrifugal <input type="radio"/> Rotary <input type="radio"/> Flowing Well     | Windmill Other (specify): _____  |
| Other (specify): _____  | Horse Power Rating of Motor: <u>1 HP.</u>  |
| Date Pump Installed: <u>11-7-11</u>   | Setting Depth: <u>40 FT. Drop Pipe</u> feet  |
| Rated Pump Capacity: <u>10</u> Gallons Per Minute                               | Number of Stages: <u>2</u>   |

| Pump Test Data  | Method of Measuring Water Level<br>Circle one  |
|---|--|
| Date Well Tested: <u>11-7-11</u>                            | <input checked="" type="radio"/> Air Line <input type="radio"/> Electric Measuring Line <input type="radio"/> Steel Tape |
| Static Water Level (A): <u>25</u> Feet Below Land Surface   | Other (specify): _____   |
| Pumping Water Level (B): <u>N/A</u> Feet Below Land Surface | For flowing well, measured shut in head: <u>N/A</u> feet   |
| Drawdown [(B) - (A)]: <u>N/A</u> Feet Below Land Surface    | Well yielded <u>25</u> GPM with a drawdown of  |
| Test Pumping Rate: <u>10</u> Gallons Per Minute             | <u>N/A</u> feet after <u>N/A</u> hours of pumping  |
| Duration of Pump Test (minimum 4 hours): <u>5</u> hours     |  |

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

Jack Ridgell 0-472 Jan Ridgell  
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

RECEIVED  
 NOV 17 2011  
 BY: [Signature]