

# 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 #: K-472  
 L. S. Elevation: \_\_\_\_\_  
 E-log #: \_\_\_\_\_

County: Jackson  
 Permit #: MS-6W-16221  
 Driller: Lynan Well  
 Date drilling completed: 8/30/05

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>Jackson County School District</u>	Latitude: <u>30° 32' 40"</u> Longitude: <u>88° 41' 21"</u>
Mailing Address: <u>Jackson County School District 10210</u>	Method of Lat/Long (circle one): <input type="checkbox"/> Conventional Survey, <input type="checkbox"/> USGS quad, <input type="checkbox"/> Hand-held GPS, <input type="checkbox"/> Survey-grade GPS
<u>Vandevore</u> <u>MS</u>	<u>NW</u> <u>NE</u> <u>SE</u> <u>SW</u> Sec <u>9</u> Twn <u>6S</u> Rng <u>7W</u>
City State Zip Code	Distance Direction Nearest Town
Telephone No. ( )	Miles of

### Well Data

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

Date well drilling started: 8/30/05 Date well drilling completed: 7/28/08

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

Static Water Level: +2 feet above or below (circle one) land surface Date measured: 8/30/05

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

Hole depth: 960 Well depth: 858 Well grouted to a depth of 780 feet

Type of grout (circle one) Cement Bentonite Mix

Casing length: 780 feet Casing diameter: 10 inches Type of casing: steel

Screen length: 50 feet Screen diameter: 6 inches Type of screen: SS rod base

Screen slot size: 1010 inches Setting depth: From 810 feet to 860 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: 700 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): MDEQ

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.

Josh Ladner 0-640  
 Print Name of Water Well Contractor and License No.

Josh Ladner  
 Signature of Water Well Contractor

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 BY: OLWR

County: Jackson  
 Permit #: MS-615-16221  
 Driller: Lynan Well  
 Date drilling completed: 8/30/05

# State Well Report

## Part 1

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 (601)354-6938 (fax)

For Office Use Only:  
 Aquifer: \_\_\_\_\_  
 Well #: K-472  
 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	Well Location
Owner Name: <u>Jackson County School District</u>	Latitude: _____ Longitude: _____
Mailing Address: <u>Jackson County School District 12210 Vandevere MS 39565</u>	Method of Lat/Long (circle one): <input type="radio"/> Conventional Survey, <input type="radio"/> USGS quad, <input type="radio"/> Hand-held GPS, <input type="radio"/> Survey-grade GPS
City: <u>Colonel Vickary Road</u> State: <u>MS</u> Zip Code: <u>39565</u>	_____ 1/4 _____ 1/4 Sec <u>9</u> Twn <u>6S</u> Rng <u>7W</u>
Telephone No. (_____) _____	Distance _____ Miles Direction _____ of Nearest Town _____

**Well Data**

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

Date well drilling started: 8/30/05 Date well drilling completed: 7/28/08

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

Static Water Level: 2 feet above or below (circle one) land surface Date measured: 8/30/05

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

Hole depth: 960 Well depth: 858 860 Well grouted to a depth of 780 feet

Type of grout (circle one) Cement Bentonite Mix

Casing length: 780 feet Casing diameter: 10 inches Type of casing: steel

Screen length: 50 feet Screen diameter: 6 inches Type of screen: SS rod base

Screen slot size: 0.010 inches Setting depth: From 810 feet to 860 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: 700 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): MDEQ

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.

Josh Kadner 0-640  
 Print Name of Water Well Contractor and License No.

Josh Kadner  
 Signature of Water Well Contractor

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# 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 #: R472

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

County: Jackson  
Permit #: MS-6W-16221  
Driller: Lynan Well  
Date completed: 7/26/06

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>Jackson County Schools</u>	Latitude: <u>30 32 40</u> Longitude: <u>88 41 21</u>
Mailing Address: <u>Jackson County Schools</u>	Method of Lat/Long (circle one): Conventional Survey,
<u>Vickburg Rd District 12210 Colonel</u>	USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS
<u>Vancleave MS 3</u>	_____ 1/4 _____ 1/4 Sec <u>9</u> Twn <u>65</u> Rng <u>74</u>
City State Zip Code	Distance Direction Nearest Town
Telephone No. <u>(228) 826 1757</u>	_____ Miles _____ of _____

Pump Type Circle one	Power Type Circle one
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston <u>Turbine</u>	<u>Electric Motor</u> Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>15</u>
Date Pump Installed: <u>7/28/06</u>	Setting Depth: <u>103</u> feet
Rated Pump Capacity: <u>250</u> Gallons Per Minute	Number of Stages: <u>4</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>7/28/06</u>	Air Line <u>Electric Measuring Line</u> Steel Tape
Static Water Level (A): <u>72</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>18</u> Feet Below Land Surface	For flowing well, measured shut in head: <u>2</u> feet
Drawdown [(B) - (A)]: <u>54</u> Feet Below Land Surface	Well yielded <u>300</u> GPM with a drawdown of
Test Pumping Rate: <u>300</u> Gallons Per Minute	<u>18</u> feet after <u>4</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>4</u> hours	

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

0-640 Jo-N Lakner  
Print Name of Pump Installer and License No. (if applicable)

[Signature]  
Signature of Pump Installer

RECEIVED

AUG 03 2006

BY: OLWR