

# 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 #: K633  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: Jackson  
Permit #: \_\_\_\_\_  
Driller: Coast Water Wells Serv.  
Date drilling completed: 7-30-09

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>Beatrice White</u>    | Latitude: <u>30° 33' 113"</u> Longitude: <u>088° 41' 283"</u>   |
| Mailing Address: <u>14408 Hwy 57</u> | Method of Lat/Long (circle one): Conventional Survey,<br>USGS quad, <u>Hand-held GPS</u> Survey-grade GPS |
| <u>Vanderve, MS 39565</u>            | <u>NW 1/4 SW 1/4 Sec 4 - Twn T6S Rng R7W</u>  |
| City State Zip Code                  | Distance Direction Nearest Town   |
| Telephone No. <u>(601) 826-5132</u>  | <u>1 1/2</u> Miles <u>NW</u> of <u>Vanderve</u>   |

### Well Data

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

Date well drilling started: 7-29-09 Date well drilling completed: 7-30-09

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

Static Water Level: 85 feet above or below (circle one) land surface Date measured: 7-30-09

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

Hole depth: 271 FT Well depth: 271 FT Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 261 feet Casing diameter: 2 inches Type of casing: PVC

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

Screen slot size: .006 inches Setting depth: From 261 feet to 271 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 Ridgdell 0-472  
Print Name of Water Well Contractor and License No.

Jack Ridgdell  
Signature of Water Well Contractor

RECEIVED  
AUG 12 2009  
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 10631  
 Jackson, MS 39289-0631  
 (601) 961-5210  
 (601) 354-6938 (fax)

**For Office Use Only:**

Aquifer: \_\_\_\_\_  
 Well #: K633  
 Elevation: \_\_\_\_\_

County: Jackson  
 Permit #: \_\_\_\_\_  
 Driller: Coast Water Wells, Inc.  
 Date completed: 7-30-09

**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>Beatrice White</u>    | Latitude: <u>30° 33' 11.3"</u> Longitude: <u>088° 41' 32.3"</u>  |
| Mailing Address: <u>14408 Hwy 57</u> | Method of Lat/Long (circle one): <u>Hand-held GPS</u> Conventional Survey, <sup>07</sup> <sub>49</sub> |
| <u>Vanceleave, MS 39565</u>          | USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS   |
| City State Zip Code                  | <u>NW 1/4 SW 1/4 Sec 4 Twn 76S Rng R 7W</u>  |
| Telephone No. <u>601 826-5132</u>    | Distance Direction Nearest Town  |
|                                      | <u>1 1/2</u> Miles <u>NW</u> of <u>Vanceleave</u>  |

| Pump Type<br>Circle one   | Power Type<br>Circle one  |
|---|---|
| Air Lift <input type="radio"/> <u>Jet</u> <input type="radio"/> Submersible | Diesel Engine <input type="radio"/> Gasoline Engine <input type="radio"/> Natural Gas |
| Bucket <input type="radio"/> Piston <input type="radio"/> Turbine           | <u>Electric Motor</u> <input type="radio"/> Hand <input type="radio"/> Tractor PTO    |
| Centrifugal <input type="radio"/> Rotary <input type="radio"/> Flowing Well | Windmill <input type="radio"/> Other (specify): _____                                 |
| Other (specify): _____  | Horse Power Rating of Motor: <u>1 HP</u>  |
| Date Pump Installed: <u>7-30-09</u>   | Setting Depth: <u>100 FT. Droppipe</u> feet   |
| Rated Pump Capacity: <u>6</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>7-30-09</u>                            | <u>Air Line</u> <input type="radio"/> Electric Measuring Line <input type="radio"/> Steel Tape <input type="radio"/> |
| Static Water Level (A): <u>85</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>17</u> GPM with a drawdown of  |
| Test Pumping Rate: <u>6</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>4</u> hours     |  |

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

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

**RECEIVED**  
 AUG 12 2009  
 BY: OLWR