

County: Jackson  
 Permit #: 0-780  
 Driller: W. Joel Pierce  
 Date drilling completed: 2-5-07

**State Well Report**  
**Part 1 - Driller's Log**

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 #: M-468  
 L. S. Elevation: \_\_\_\_\_  
 E-log #: \_\_\_\_\_

*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)	Well or Borehole Location
Owner Name: <u>Greg Cronier</u>	Latitude: <u>38° 27' 42.0"</u> Longitude: <u>90° 35' 44.2"</u>
Mailing Address: <u>5600 Kelly School Rd</u>	Method of Lat/Long (circle one): Conventional Survey, <u>25</u>
<u>Helena</u> <u>MS</u> <u>39562</u>	USGS quad: <u>Hand-held GPS</u> , Survey-grade GPS
City State Zip Code	<u>NW 1/4 SE 1/4 Sec 2 Twn 65 Rng 5W</u>
Telephone No. <u>(228) 475-7845</u>	Distance Direction Nearest Town <u>4</u> Miles <u>south east</u> of <u>Big Pond</u>

**Well / Borehole Data**

Date drilling started: 2-5-07 Date drilling completed: 2-5-07 Hole depth: 75 Hole diameter: 2 inches

Location of the source of any surface water used for drilling: Arville MS

Method of dosing and volume of Chlorine used in drilling and development: 49 gal chlorine 2000 water

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: 2-5-07

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

Well depth: 75 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement  Bentonite \_\_\_\_\_ Mix \_\_\_\_\_

Casing length: 65 feet Casing diameter: 2 inches Type of casing: sch 40 Plastic

Screen length: 10 feet Screen diameter: 2 inches Type of screen: sch 80 6 slot

Screen slot size: 6 slot inches Setting depth: From 0 feet to 75 feet  
65 FT casing 10 FT screen

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

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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)

County: Jackson  
 Permit #: 0-780  
 Driller: W. Joel Pierce  
 Date completed: 2-5-07  
*Copy information from block on Part 1*

For Office Use Only:

Aquifer: \_\_\_\_\_  
 Well #: M-468  
 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	Well Location
Owner Name: <u>Drag Crown</u>	Latitude: <u>88-27-420</u> Longitude: <u>30-33-444</u>
Mailing Address: <u>5000 Hillyard Rd</u>	Method of Lat/Long (check one): Conventional Survey <input type="checkbox"/> <sup>25</sup> USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
<u>Helen</u> <u>MS</u> <u>39562</u>	<u>26</u> <u>1/4 SE 1/4 Sec 2 T6S R5W</u>
City State Zip Code	Distance Direction Nearest Town
Telephone No. ( <u>228</u> ) <u>475-7845</u>	<u>4</u> Miles <u>southwest</u> of <u>Big Point</u>

Pump Type Circle one	Power Type Circle one
Air Lift <input type="checkbox"/> Jet <input checked="" type="checkbox"/> Submersible <input type="checkbox"/>	Diesel Engine <input type="checkbox"/> Gasoline Engine <input type="checkbox"/> Natural Gas <input type="checkbox"/>
Bucket <input type="checkbox"/> Piston <input type="checkbox"/> Turbine <input type="checkbox"/>	<u>Electric Motor</u> <input checked="" type="checkbox"/> Hand <input type="checkbox"/> Tractor PTO <input type="checkbox"/>
Centrifugal <input type="checkbox"/> Rotary <input type="checkbox"/> Flowing Well <input type="checkbox"/>	Windmill <input type="checkbox"/> Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>1HP</u>
Date Pump Installed: <u>2-5-07</u>	Setting Depth: <u>30FT jetline</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 Circle one
Date Well Tested: <u>2-5-07</u>	<u>Air Line</u> <input checked="" type="checkbox"/> Electric Measuring Line <input type="checkbox"/> Steel Tape <input type="checkbox"/>
Static Water Level (A): <u>3</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>25</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>5</u> Feet Below Land Surface	Well yielded <u>9</u> GPM with a drawdown of
Test Pumping Rate: <u>10</u> Gallons Per Minute	<u>2</u> feet after <u>48</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>48</u> hours	

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

Joel Pierce - 0780 \_\_\_\_\_  
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

Form OLWR-118  
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