

County: Jackson  
 Permit #: \_\_\_\_\_  
 Driller: David Carson  
 Date drilling completed: 6/3/2019

**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 #: J 61  
 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>Ashley Daywalt</u>	Latitude: <u>32° 02' 49"</u> Longitude: <u>81° 13' 34"</u>
Mailing Address: <u>342 G.R. 1612</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
<u>Louis</u> <u>MS</u> <u>39338</u>	<u>NW 1/4 NE 1/4</u> Sec <u>1</u> Twn <u>21N</u> Rng <u>12W</u> <span style="color:red">10E</span>
City State Zip Code	Distance <u>3</u> Miles Direction <u>S/E</u> of Nearest Town <u>Louis MS</u>
Telephone No. <u>(601) 310-6978</u>	<u>39338</u>

**Well / Borehole Data**

Date drilling started: 5/28 Date drilling completed: 6-3 Hole depth: 380 Hole diameter: 6 3/4

Location of the source of any surface water used for drilling: Comm. water well

Method of dosing and volume of Chlorine used in drilling and development: \_\_\_\_\_

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: Chicken farm

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

Static Water Level: 160 feet above or below (circle one) land surface Date measured: 6-3

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

Well depth: 380 Well grouted to a depth of 25 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 300 feet Casing diameter: 4" inches Type of casing: PVC

Screen length: 80 feet Screen diameter: 2" inches Type of screen: PVC

Screen slot size: #10 inches Setting depth: From 300 feet to 380 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: 280 feet. *If telescoped or more than one screen, describe on next page*

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**JUL 08 2019**  
**BY OLWR**

Southern MS Water Well Drilling #0-3831

Form: OLWR-SWR-1A (04/08)  
Ranchell Coni.  
6/30/2019



# 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: Jasper  
Permit #: \_\_\_\_\_  
Driller: David Cain  
Date completed: 6/3/2019  
*Copy information from block on Part 1*

For Office Use Only:  
Aquifer: \_\_\_\_\_  
Well #: J 61  
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>Ashley Dayvolt</u>	Latitude: <u>32° 02' 49"</u> Longitude: <u>89° 13' 39"</u>
Mailing Address: <u>342 C.R. 1612</u>	Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____ <input checked="" type="checkbox"/> Hand-held GPS _____ Survey-grade GPS _____
<u>Louis</u> <u>Ms</u> <u>39338</u>	<u>NW</u> <u>NE</u> <u>1</u> <u>T</u> <u>21</u> <u>R</u> <u>12</u> <u>19E</u>
City State Zip Code	Distance Direction Nearest Town
Telephone No. <u>(601) 310-6978</u>	<u>3</u> Miles <u>S/E</u> of <u>Louis MS</u>

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Pump Type Circle one	Power Type Circle one
Air Lift Jet <input checked="" type="radio"/> Submersible	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston Turbine	<input checked="" type="radio"/> Electric Motor Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>5 hp</u>
Date Pump Installed: <u>6-3-2019</u>	Setting Depth: <u>240</u> feet
Rated Pump Capacity: <u>50</u> Gallons Per Minute	Number of Stages: <u>15</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>6-3-2019</u>	Air Line Electric Measuring Line Steel Tape
Static Water Level (A): <u>160</u> Feet Below Land Surface	Other (specify): <u>String</u>
Pumping Water Level (B): <u>225</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B)-(A)]: <u>65</u> Feet Below Land Surface	Well yielded <u>60</u> GPM with a drawdown of
Test Pumping Rate: <u>00</u> Gallons Per Minute	<u>65</u> feet after <u>6</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>6</u> hours	

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.  
Southern Me Water Well Drilling Randall Cain 6-30-2019  
Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer  
#0-3831 Form: OLWR-SWR-1B (04/08)



