

Banksston #1

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 #: R-47
L. S. Elevation:
E-log #:

County: Jasper
Permit #:
Driller: John W Thompson
Date drilling completed: 11-26-08

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: Owner Name: Sparner Petroleum, Mailing Address: 1210 E Capitol St, Jackson MS 39201. Well Location: Latitude/Longitude, Method of Lat/Long, USGS quad, Hand-held GPS, Survey-grade GPS, Distance: 8 Miles, Direction: S, Nearest Town: Dry Springs.

Well Data: Purpose of Well: Other: rig supply. Date well drilling started: 11-25-08, Date well drilling completed: 11-26-08. Static Water Level: 58 feet above of below land surface. Method of Measurement: electric tape. Hole depth: 283, Well depth: 170, Well grouted to a depth of 20 feet. Type of grout: Bentonite. Casing length: 130 feet, Casing diameter: 4 inches, Type of casing: PVC. Screen length: 40 feet, Screen diameter: 4 inches, Type of screen: PVC Slotted. Screen slot size: .010 inches, Setting depth: From 130 feet to 170 feet. Type of completion: Natural Development. Top of lap pipe or reduction in casing: feet. Logs run: No log run.

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.

John W Thompson 0-679
Print Name of Water Well Contractor and License No.

John W Thompson
Signature of Water Well Contractor

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If well telescopes please sketch below and show depths

Ground Level

Description of Formations Encountered	From	To
sandy clay	0	45
clay + rock strips	45	75
sand + clay strips	75	95
clay	95	125
clay	125	130
sand with clay strips	130	170
clay	170	200
clay	200	280

More than one screen, show location of each on sketch

Sketch the property layout and include the following: 1) the well location; 2) any permanent structures on the property that may aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and the well; 4) indicate direction.

Landowner Name: Spomer Petroleum

John W. Thompson  
 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)

County: Jasper  
 Permit #: \_\_\_\_\_  
 Driller: John W Thompson  
 Date completed: 11-26-08  
*Copy information from block on Part 1*

**For Office Use Only:**

Aquifer: \_\_\_\_\_  
 Well #: R-47  
 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>Spooner Petroleum</u>	Latitude: _____ Longitude: _____
Mailing Address: <u>1210 E Capital St</u>	Method of Lat/Long (check one): Conventional Survey _____
<u>Jackson MS</u>	USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
City _____ State _____ Zip Code _____	_____ 1/4 _____ 1/4 Sec <u>13</u> T <u>10N</u> R <u>13W</u>
Telephone No. (____) _____	Distance _____ Direction _____ Nearest Town _____
	<u>5</u> Miles <u>S</u> of <u>Bay Springs</u>

Pump Type Circle one	Power Type Circle one
Air Lift                      Jet <input checked="" type="radio"/> <u>Submersible</u>	Diesel Engine                      Gasoline Engine                      Natural Gas
Bucket                      Piston                      Turbine	<input checked="" type="radio"/> <u>Electric Motor</u> Hand                      Tractor PTO
Centrifugal                      Rotary                      Flowing Well	Windmill                      Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>5</u>
Date Pump Installed: <u>11-26-08</u>	Setting Depth: <u>130</u> feet
Rated Pump Capacity: <u>55</u> Gallons Per Minute	Number of Stages: _____

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>11-26-08</u>	Air Line <input checked="" type="radio"/> <u>Electric Measuring Line</u> Steel Tape
Static Water Level (A): <u>58</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>121</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>6.3</u> Feet Below Land Surface	Well yielded <u>7.5</u> GPM with a drawdown of
Test Pumping Rate: <u>75</u> Gallons Per Minute	<u>63</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.

John W Thompson 0-679                      John W Thompson  
 Print Name of Pump Installer and License No. (if applicable)                      Signature of Pump Installer

Form: OLWR-SWR-1B

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