

# STATE WELL REPORT

## Part I

### Driller's Log

Mississippi Department of Environmental Quality  
 Office of Land and Water Resources  
 P.O. Box 2309  
 Jackson, MS 39225-2309  
 (601)961-5210  
 (601)360-0535 (fax)

#### For Office Use Only:

Well #: 13121  
 Aquifer: \_\_\_\_\_  
 E-Log #: \_\_\_\_\_

County: Jones  
 Permit #: N/A  
 Driller: A-1 Drilling Serv  
 Date drilling completed: 11-5-13

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.

Well Owner Information <i>(Landowner if borehole is not for a water well)</i>		Well or Borehole Location	
Owner Name: <u>SHADY GROVE UTIL. DIST.</u>		Latitude: <u>33°04'84"</u> Longitude: <u>89°09'55"</u>	
Mailing Address: <u>149 REEVES RD.</u>		Method of Lat/Long (check one): Conventional Survey _____ USGS quad <input checked="" type="checkbox"/> Hand-held GPS <input checked="" type="checkbox"/> Survey-grade GPS _____	
<u>LAUREL</u> <u>MS</u> <u>39443</u>		<u>NW/4</u> <u>NE 1/4 SE 1/4</u> Sec <u>11</u> T <u>9N</u> R <u>12W</u>	
City State Zip Code		<u>1</u> Miles <u>NW</u> of <u>SHADY GROVE</u>	
Telephone No. <u>(601) 428 0311</u>		(Distance) (Direction) (Nearest Town)	

Well / Borehole Data

Date drilling started: 11-5-13 Date drilling completed: 11-5-13 Hole depth: 307 1/2 Hole diameter: 5 1/2"

Location of the source of any surface water used for drilling: None used

Method of dosing and volume of Chlorine used in drilling and development: 2 gal / 1000 gal H<sub>2</sub>O

Logs run (circle all applicable): No log run  Electro  Gamma Ray Density Sonic Neutron Other: \_\_\_\_\_

Name of organization running log(s): TEACO GEOPHYSICAL

Purpose of borehole (circle one): Water Well  Geotechnical/Geological Investigation \_\_\_\_\_ Ground Source Heat Pump \_\_\_\_\_  
Test hole for well #5 (GW-17193) Seismic Survey \_\_\_\_\_ Other (describe) TEST HOLE FOR WATER WELL

*If drilling is not related to water well construction, skip the remainder of this block*

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

Other (describe): PIA

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

Static Water Level: \_\_\_\_\_ feet (above or below) land surface Date measured: \_\_\_\_\_  
 (circle one)

Method of measurement (circle one): Steel tape \_\_\_\_\_ Electric tape \_\_\_\_\_ Air line \_\_\_\_\_ Other (describe): \_\_\_\_\_

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

Casing length: \_\_\_\_\_ feet Casing diameter: \_\_\_\_\_ inches Type of casing: \_\_\_\_\_

Screen length: \_\_\_\_\_ feet Screen diameter: \_\_\_\_\_ inches Type of screen: \_\_\_\_\_

Screen slot size: \_\_\_\_\_ inches Setting depth: From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Type of completion (circle all applicable): Gravel packed \_\_\_\_\_ Underreamed \_\_\_\_\_ Open hole \_\_\_\_\_ Natural Development \_\_\_\_\_

Other (describe): \_\_\_\_\_

Top of lap pipe or reduction in casing: \_\_\_\_\_ feet

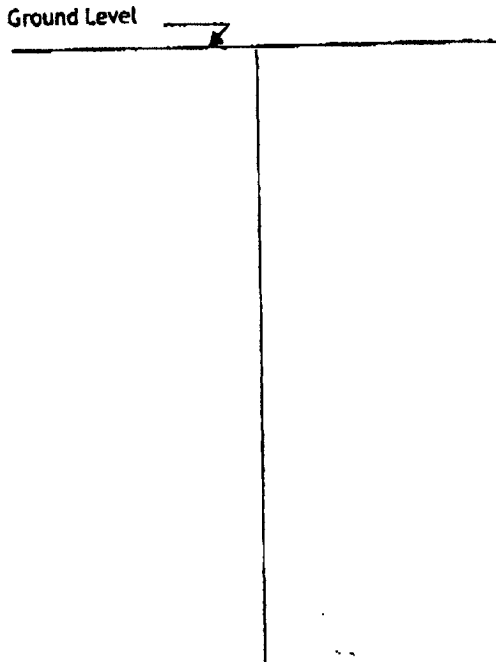
*If telescoped or more than one screen, describe on next page*

County: JONES  
 Permit #: NA

For Office Use Only:  
 Well #: BR21

The sketch below only required for water wells

If well telescopes, show depths on sketch.



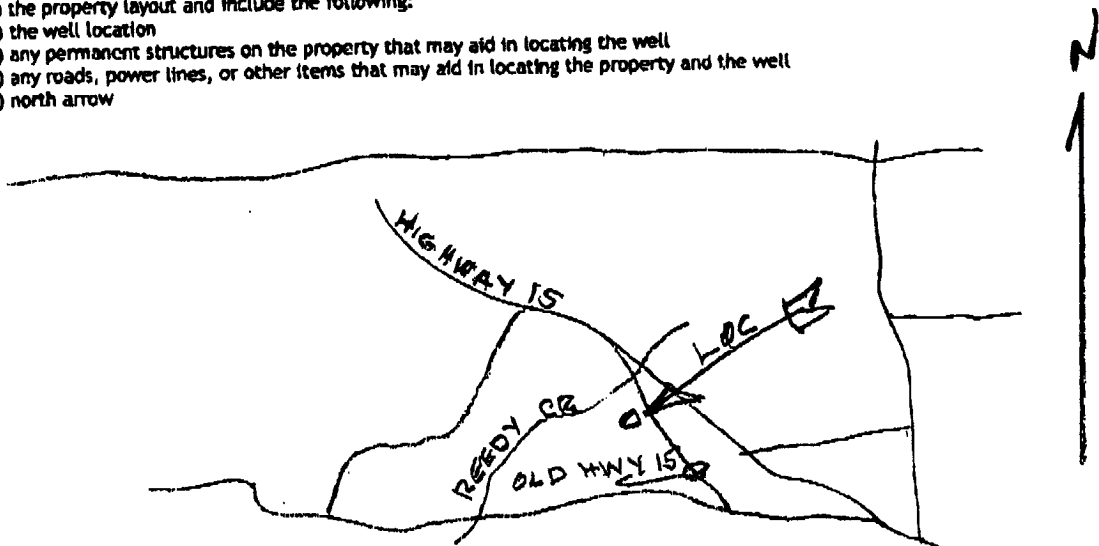
Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth) Ground level	To (depth)
Tan clay		9
Gray clay	9	14
Sand	14	17
White clay	17	51
Sand	51	65
Tan clay	65	80
lt gray-green clay	80	135
Sand	135	140
Gray-green clay	140	157
Sandy clay w/ sand streaks	157	225
Sand	225	228
Rock	228	230
Sand	230	231
Rock	231	232
Sand and clay mixed	232	262
Gray clay	262	286
Rock	286	288
Clay gray	288	302
Rock	302	303
Clay	303	307
Rock	307	307 1/2

If 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) north arrow



Landowner Name: Shady Grove Utility Dist SHADY GROVE

I HEREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state laws.

Wilbur T. Baughman 0410 11-20-13  
 Print Name of Responsible Licensee and License No. Date

*Wilbur T. Baughman*  
 Signature of Licensee