

### 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 39225-2309  
 (601)961-5210  
 (601)360-0535 (fax)

County: Lauderdale  
 Permit #: \_\_\_\_\_  
 Driller: McDonald & Hill  
 Date drilling completed: 10/2/13

**For Office Use Only:**  
 Well #: N1146  
 Aquifer: \_\_\_\_\_  
 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.*

| Well Owner Information<br><i>(Landowner if borehole is not for a water well)</i> | Well or Borehole Location  |
|--|--|
| Owner Name: <u>Steve Hardin</u>  | Latitude: <u>32.324719</u> Longitude: <u>-88.715390</u>                                      |
| Mailing Address: <u>Officers Lake Rd</u>   | <u>32-19-29</u> <u>88-42-55</u><br>Method of Lat/Long (check one): Conventional Survey _____ |
| <u>Meridian</u> <u>MS</u> <u>39301</u>   | USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____                                 |
| City _____ State _____ Zip Code _____  | <u>NW</u> <u>1/4</u> <u>NE</u> <u>1/4</u> , Sec <u>36</u> T <u>6N</u> R <u>15E</u>           |
| Telephone No. (____) _____   | _____ Miles _____ of _____<br>(Distance) (Direction) (Nearest Town)                          |

**Well / Borehole Data**

Date drilling started: 9/27/13 Date drilling completed: 10/2/13 Hole depth: 350 Hole diameter: 7

Location of the source of any surface water used for drilling: Community

Method of dosing and volume of Chlorine used in drilling and development: 1 lb per 1,000 gallons

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

Name of organization running log(s): \_\_\_\_\_

Purpose of borehole (circle 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 (circle all applicable): Home Industrial Public Supply Irrigation Fish Culture

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

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

Static Water Level: 170 feet [above or (below) land surface] Date measured: 10/2/13  
 (circle one)

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

Well depth: 350 Well grouted to a depth of: 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 320 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 30 feet Screen diameter: 4 inches Type of screen: PVC/sawed

Screen slot size: .008/.006 inches Setting depth: From 320 feet to 350 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*

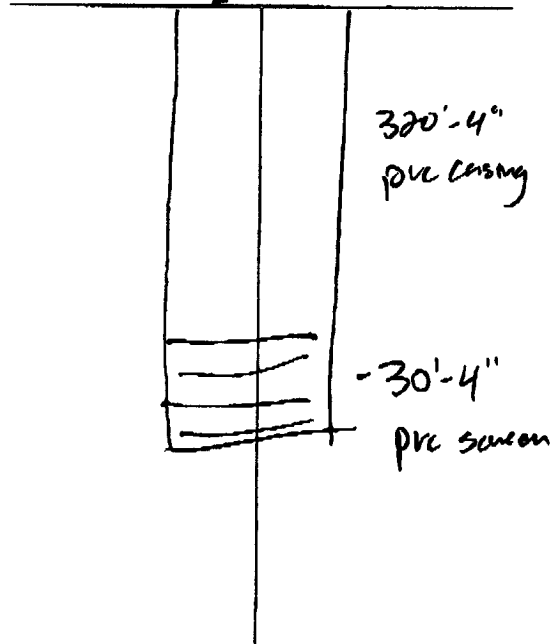
County: Lauderdale  
 Permit #: \_\_\_\_\_

**For Office Use Only:**  
 Well #: M146

The sketch below only required for water wells

If well telescopes, show depths on sketch.

Ground Level  $\rightarrow$



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

| Description of Formations Encountered | From (depth) | To (depth) |
|---------------------------------------|--------------|------------|
| Red Sand                              | Ground level | 30         |
| Shale                                 | 30           | 50         |
| shale - lignite st.                   | 50           | 70         |
| shale                                 | 70           | 95         |
| Coarse sand                           | 95           | 110        |
| Sandy shale                           | 110          | 135        |
| Coarse sand                           | 135          | 145        |
| Sandy shale                           | 145          | 160        |
| shale                                 | 160          | 200        |
| Rock                                  | 209          | 213        |
| sandy shale                           | 213          | 240        |
| sand                                  | 240          | 260        |
| sandy shale                           | 260          | 280        |
| sand                                  | 280          | 310        |
| Fine sand                             | 310          | 320        |
| Medium sand.                          | 320          | 350        |
|                                       |              |            |
|                                       |              |            |
|                                       |              |            |
|                                       |              |            |
|                                       |              |            |

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: \_\_\_\_\_

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.

McDonald & Hill    0-8    6/27/14    [Signature]  
 Print Name of Responsible Licensee and License No.    Date    Signature of Licensee

### 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 39225-2309  
 (601)961-5210  
 (601) 360-0535 (fax)

#### For Office Use Only:

Well #: N1146  
 Aquifer: \_\_\_\_\_

County: Lauderdale  
 Permit #: \_\_\_\_\_  
 Driller: McDonald & Hill  
 Date completed: 10-3-13  
 Copy information from block on Part 1

*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.*

|   |  |  |  |  |  |
|---|--|--|--|--|--|
| <b>Well Owner Information</b>             |  |  | <b>Well Location</b>   |  |  |
| Owner Name: <u>Steve Hardin</u>           |  |  | Latitude: <u>32.324719</u> Longitude: <u>-89.715390</u>                            |  |  |
| Mailing Address: <u>Officers Lake Rd.</u> |  |  | Method of Lat/Long (check one): <u>Conventional Survey</u>                         |  |  |
| <u>Meridian</u> <u>MS</u> <u>39301</u>    |  |  | USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____                       |  |  |
| City _____ State _____ Zip Code _____     |  |  | <u>NW</u> <u>1/4</u> <u>NE</u> <u>1/4</u> , Sec <u>30</u> T <u>4N</u> R <u>15E</u> |  |  |
| Telephone No. (____) _____                |  |  | _____ Miles _____ of _____ (Distance) (Direction) (Nearest Town)                   |  |  |

**Pump Type (circle one)**  
 Submersible  Turbine  Air Lift  Centrifugal  Flowing Well  Jet  Piston  Rotary  Other (describe): \_\_\_\_\_  
 Date Pump Installed: 10-3-13 Rated Pump Capacity: 5 Gallons Per Minute  
 Is This Pump (circle one):  New  Repaired  Replacement

**Power Type (circle one)**  
 Electric  Diesel  Gasoline  Natural Gas  Tractor PTO  Windmill  Other (describe): \_\_\_\_\_  
 Horse Power Rating of Motor: 3/4 Setting Depth: 240 feet Number of Stages: 21

**Pump Test Data for Non Flowing Well**  
 Date Well Tested: 10-3-13 Duration of Pump Test (minimum 4 hours): 4 hours  
 Static Water Level (A): 170 Feet Below Land Surface Pumping Water Level (B): 200 Feet Below Land Surface  
 Drawdown [(B) - (A)]: 30 Feet Below Land Surface Test Pumping Rate: 5 Gallons Per Minute  
 Method of measurement (circle one):  Steel tape  Electric tape  Air line  Other (describe): \_\_\_\_\_

**Pump Test Data for Flowing Well**  
 Measured shut in head: \_\_\_\_\_ feet.  
 Well yielded 5 GPM with a drawdown of 30 feet after 40 hours of pumping

**Meter Installation**  
 Meter Manufacturer: \_\_\_\_\_ Meter Serial Number: \_\_\_\_\_  
 Meter Model Number/Name: \_\_\_\_\_ Type of Meter: \_\_\_\_\_  
 Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): \_\_\_\_\_  
 Installation Date: \_\_\_\_\_ Meter Installed by: \_\_\_\_\_  
 Is This Meter (circle one):  New  Repaired  Replacement  
*Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.*

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.  
McDonald & Hill 0-8 10/27/14 Shawna Hill  
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer