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Dept of Environmental Quality
Office of Pollution Control

County: Lawrence

Permit #:

Driller: Walker Hill Env., Inc.

Date drilling completed: 4-24-06

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 #: L-55

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)

Owner Name: Britt Speights

Mailing Address: 522 River Road

Oakvale, MS 39656
City State Zip Code

Telephone No. (601) 444-4749

Well or Borehole Location

Latitude: 31 ° 24 ' 51 " Longitude: 89 ° 58 ' 12 "

Method of Lat/Long (circle one): Conventional Survey, USGS quad, (Hand-held GPS), Survey-grade GPS

SE ¼ NW ¼ Sec 12 Twn 5N Rng 20W

Distance 1.5 Miles Direction SW of Nearest Town Oakale

Well / Borehole Data

Date drilling started: 4-24-06 Date drilling completed: 4-24-06 Hole depth: 110 ft. Hole diameter: 7 inch

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

Method of dosing and volume of Chlorine used in drilling and development: 8 oz. per 1000 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 (check one): Water Well x 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 X Industrial___ Public Supply___ Irrigation___ Fish Culture ___ Other:

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

Static Water Level: 24 feet above or below (circle one) land surface Date measured: 4-24-06

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

Well depth: 110 Well grouted to a depth of 20 feet Type of grout (circle one): Neat (Cement Bentonite Mix)

Casing length: 100 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 10 feet Screen diameter: 4 inches Type of screen: PVC

Screen slot size: .010 inches Setting depth: From 100 feet to 110 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: NA feet. ***If telescoped or more than one screen, describe on next page***

Form: OLWR-SWR-1A

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L-55

The sketch below only required for water wells

If well telescopes, show depths on sketch.

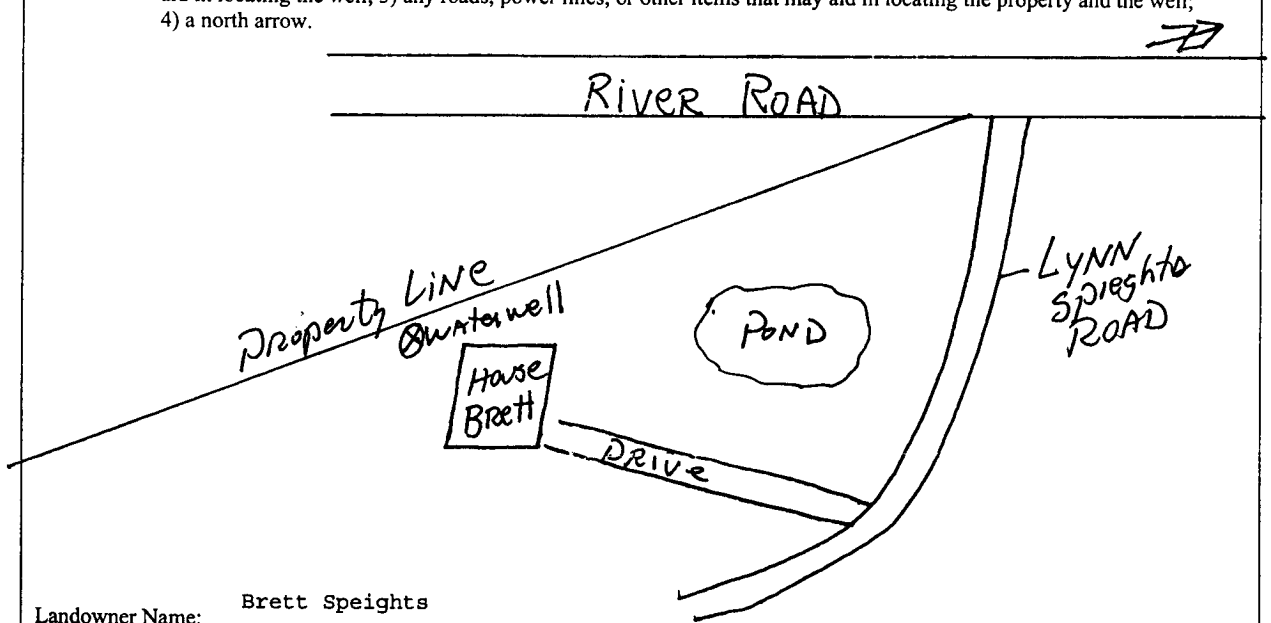
Ground Level

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)
	Ground Level	
Top soil	0	2
Clay	2	21
Sand & gravel	21	34
Clay	34	85
Sand course	85	110

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) a north arrow.



Landowner Name: Brett Speights

Form: OLWR-SWR-1A

I 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.

Gary P. Hill 0578 5-30-06

Print Name of Responsible Licensee and License No. **Date** **Signature of Licensee**

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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: Lawrence
Permit #:
Driller: Walker Hill Env.
Date completed: 4-24-06
Copy information from block on Part 1

For Office Use Only:
Aquifer:
Well #: L-55
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

Owner Name: Brett Speights
Mailing Address: 522 River Road
Oakvale, MS 39656
City State Zip Code
Telephone No. (601) 444-4749

Well Location

Latitude: 31 24' 51" Longitude: 89 58' 12"
Method of Lat/Long (check one): Conventional Survey___, USGS quad___, Hand-held GPS___, Survey-grade GPS___
SE ¼ NW ¼ Sec 12 T 5N R 20W
Distance Direction Nearest Town
1.5 Miles SW of Oakvale

Pump Type
Circle one

Air Lift, Jet, (Submersible), Bucket, Piston, Turbine, Centrifugal, Rotary, Flowing Well
Other (specify):
Date Pump Installed: 4-24-06
Rated Pump Capacity: 10 Gallons Per Minute

Power Type
Circle one

Diesel Engine, Gasoline Engine, Natural Gas, (Electric Motor), Hand, Tractor PTO, Windmill, Other (specify):
Horse Power Rating of Motor: 3/4
Setting Depth: 60 feet
Number of Stages: 13

Pump Test Data

Date Well Tested: 4-24-06
Static Water Level (A): 24 Feet Below Land Surface
Pumping Water Level (B): 28 Feet Below Land Surface
Drawdown [(B) – (A)]: 6 Feet Below Land Surface
Test Pumping Rate: 12 Gallons Per Minute
Duration of Pump Test (minimum 4 hours): 6 hours

Method of Measuring Water Level
Circle one

Air Line, (Electric Measuring Line), Steel Tape
Other (specify):
For flowing well, measured shut in head: ___ feet
Well yielded 12 GPM with a drawdown of 6 feet after 6 hours of pumping

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

Gary P. Hill 0578
Print Name of Pump Installer and License No. (if applicable)

Signature of Pump Installer

Form: OLWR-SWR-1B

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