

# 10-113

### 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)

County: Leflore  
 Permit #: G10-44200  
 Driller: Pete Suggiston  
 Date drilling completed: 7-18-10

For Office Use Only:  
 Aquifer: 6139  
 Well #: \_\_\_\_\_  
 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<br>(Landowner if borehole is not for a water well) | Well or Borehole Location                                    |
|--|--|
| Owner Name: <u>Gary Coleman</u>  | Latitude: <u>33° 36' 05.0</u> Longitude: <u>90° 14' 47.1</u> |
| Mailing Address: <u>1005 Riverbirch Cr.</u>                                  | Method of Lat/Long (circle one): Conventional Survey,        |
| <u>Greenwood Ms 38930</u>  | USGS quad: <u>Hand-held GPS</u> , Survey-grade GPS           |
| City State Zip Code  | <u>SE 1/4 NE 1/4 Sec 13 Twn 20 N Rng 1 W</u>                 |
| Telephone No. <u>(662) 453-6100</u>  | Distance Direction Nearest Town                              |
|  | <u>1</u> Miles <u>S</u> of <u>Money, Ms</u>                  |

**Well / Borehole Data**

Date drilling started: 7-18 Date drilling completed: 7-18 Hole depth: 98 Hole diameter: 28"

Location of the source of any surface water used for drilling: Canal 1/4 m. South

Method of dosing and volume of Chlorine used in drilling and development: Sodium Hypo Chlorite @ 10 ppm

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*

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Purpose of Well (check one): Home \_\_\_\_\_ Industrial \_\_\_\_\_ Public Supply \_\_\_\_\_ Irrigation  Fish Culture \_\_\_\_\_ Other: \_\_\_\_\_

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

Static Water Level: 22' feet above or below (circle one) land surface Date measured: 7-19-10

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

Well depth: 98' Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 58 feet Casing diameter: 16" inches Type of casing: PVC sch 40

Screen length: 40 feet Screen diameter: 16 inches Type of screen: PVC sch 40

Screen slot size: .032 inches Setting depth: From 58 feet to 98 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: \_\_\_\_\_ feet. *If telescoped or more than one screen, describe on next page*

Form: OLWR-SWR-1A (04/08)

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The sketch below only required for water wells

If well telescopes, show depths on sketch.

Ground Level → 6644200



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 |            |
| Clay                                  | 0            | 20         |
| Fine sand                             | 20           | 22         |
| Coarse sand & Gravel                  | 22           | 98         |
|                                       |              |            |
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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.

*See Map Attached*

Landowner Name: Gary Coleman

Form: OLWR-SWR-1A (04/08)

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.

Pete Sappington 0430      7-21  
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 2309  
 Jackson, MS 39225  
 (601)961-5210  
 (601)961-5228 (fax)

County: LEFLORE  
 Permit #: GW-44200  
 Driller: Pete Sappington  
 Date completed: 7-18-10  
*Copy information from block on Part 1*

For Office Use Only:

Aquifer: G14H139  
 Well #: \_\_\_\_\_  
 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>Gary Properties- Gary Colman</u>   | Latitude: <u>33° 35' 40.55"</u> Longitude: <u>90° 15' 35.9"</u>   |
| Mailing Address: <u>1005 River Birch Cove</u>     | Method of Lat/Long (check one): Conventional Survey _____<br>USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____ |
| <u>Greenwood, MS 38930</u><br>City State Zip Code | _____ ¼ _____ ¼ Sec <u>13</u> T <u>20N</u> R <u>1W</u>  |
| Telephone No. <u>(662) 453-6100</u>               | Distance Direction Nearest Town<br><u>4</u> Miles <u>SW</u> of <u>MOOREY</u>  |

| Pump Type<br>Circle one                             | Power Type<br>Circle one                         |
|---|--|
| Air Lift Jet Submersible                            | <u>Diesel Engine</u> Gasoline Engine Natural Gas |
| Bucket Piston <u>Turbine</u>                        | Electric Motor Hand Tractor PTO                  |
| Centrifugal Rotary Flowing Well                     | Windmill Other (specify): _____                  |
| Other (specify): _____                              | Horse Power Rating of Motor: <u>60</u>           |
| Date Pump Installed: <u>7-27-10</u>                 | Setting Depth: <u>60</u> feet                    |
| Rated Pump Capacity: <u>1200</u> Gallons Per Minute | Number of Stages: <u>2</u>                       |

| Pump Test Data  | Method of Measuring Water Level<br>Circle one                                     |
|---|---|
| Date Well Tested: _____                                   | Air Line Electric Measuring Line <u>Steel Tape</u>                                |
| Static Water Level (A): <u>22</u> Feet Below Land Surface | Other (specify): _____  |
| Pumping Water Level (B): _____ Feet Below Land Surface    | For flowing well, measured shut in head: _____ feet                               |
| Drawdown [(B) - (A)]: _____ Feet Below Land Surface       | Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping |
| Test Pumping Rate: _____ Gallons Per Minute               |   |
| Duration of Pump Test (minimum 4 hours): _____ hours      |   |

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

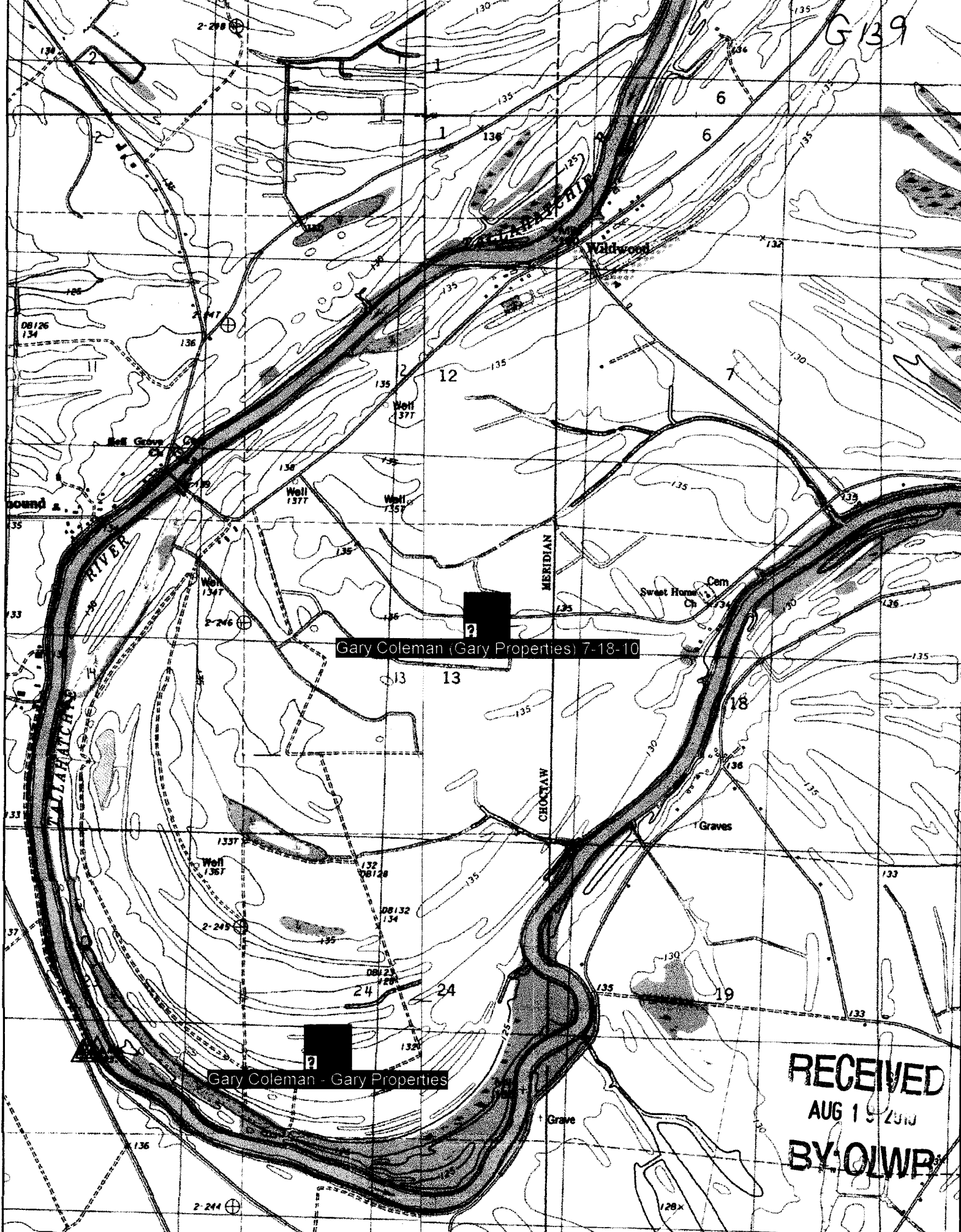
DAVID P. HOLT 0-752P \_\_\_\_\_  
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

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 Form: OLWR-SWR-1B (04/08)

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G 139



Gary Coleman (Gary Properties) 7-18-10

Gary Coleman - Gary Properties

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