

County: Lincoln

Permit #:

Driller: LARRY EASTLY

Date drilling completed: 3-27-09

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  
(601)961-5210  
(601)340-0515 (fax)

For Office Use Only:

Aquifer:

Well #: F-77

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)	Well or Borehole Location
Owner Name: <u>MAURICE BROWN</u>	Latitude: <u>31.35.07</u> Longitude: <u>90.37.00</u>
Mailing Address: <u>3013 Blue Bird Trl</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>
<u>Brookhaven MS 39601</u>	USGS quad, Hand-held GPS, Survey-grade GPS
City State Zip Code	<u>SE</u> x <u>SE</u> x Sec <u>8</u> Twp <u>7N</u> Rng <u>6E</u>
Telephone No.:	Distance Direction Nearest Town
	<u>8</u> Miles <u>W</u> of <u>BROOKHAVEN</u>

Well / Borehole Data

Date drilling started: 3-26 Date drilling completed: 3-27 Hole depth: 120 Hole diameter: 7 7/8"

Location of the source of any surface water used for drilling: WATER WELL

Method of casing and volume of Chlorine used in drilling and development: 1 GALLON PER 3000 GAL

Logs run (circle all applicable): No logs 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*

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: 80 feet above or below (circle one) land surface Date measured: 3-27-09

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

Well depth: 104 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 84 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 20 feet Screen diameter: 4 inches Type of screen: PVC

Screen slot size: 010 inches Setting depth: From 84 feet to 104 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 increased of more than \_\_\_\_\_ feet, describe on next page*

Form: OLWR-SWR-1A

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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

County: LINCOLN  
 Permit #: \_\_\_\_\_  
 Installer: LARRY Easley  
 Date completed: 3-27-09  
 Copy information from check on Part 1

For Office Use Only:  
 Aquifer: \_\_\_\_\_  
 Well #: E-77  
 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>Maurice Brown</u>	Latitude: _____ Longitude: _____
Mailing Address: <u>3013 Blue Bird Trail</u>	Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____ Hand-held GPS _____ Survey-grade GPS _____
City _____ State _____ Zip Code _____	_____ 1/4 _____ 1/4 Sec _____ T _____ R _____
Telephone No. (_____) _____	Distance _____ Direction _____ Nearest Town _____ _____ Miles _____ of _____

Pump Type Circle one	Power Type Circle one
Air Lift _____ Jet _____ <u>Submersible</u>	Diesel Engine _____ Gasoline Engine _____ Natural Gas _____
Bucket _____ Piston _____ Turbine _____	<u>Electric Motor</u> _____ Hand _____ Tractor PTO _____
Centrifugal _____ Rotary _____ Flowing Well _____	Windmill _____ Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>1/2</u>
Date Pump Installed: <u>3-27-09</u>	Setting Depth: <u>100</u> feet
Rated Pump Capacity: <u>12</u> Gallons Per Minute	Number of Stages: <u>9</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>3-27-09</u>	Air Line _____ Electric Measuring Line _____ <u>Steel Tape</u>
Static Water Level (A): <u>80</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>82</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown (B) - (A): <u>2</u> Feet Below Land Surface	Well yielded <u>12</u> OPM with a drawdown of _____
Test Pumping Rate: <u>12</u> Gallons Per Minute	<u>2</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.

LARRY Easley 510 \_\_\_\_\_  
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

Form OLWR-SWR-18

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