

# State Well Report

## Part 1

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 #: K 136  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: Lincoln  
Permit #: \_\_\_\_\_  
Driller: GREEN WATER WELL & SUPPLY, INC.  
Date drilling completed: 2-15-13

**State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.**

Well Owner Information	Well Location
Owner Name: <u>Kelvin D. Clark</u>	Latitude: <sup>28</sup> <u>31° 20' 25"</u> Longitude: <u>90° 34' 18"</u>
Mailing Address: <u>1047 Carter Ave.</u>	Method of Lat/Long (circle one): <sup>35</sup> Conventional Survey, <sup>11</sup>
<u>Baton Rouge, La. 70806</u> City State Zip Code	USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS
Telephone No. <u>(225) 924-3803</u>	<u>NW 1/4 SE 1/4 Sec 34 Twn 6N Rng 6E</u> <sup>SW</sup> Distance <sup>14</sup> Direction Nearest Town <u>.5 Miles S of West Lincoln</u>

**Well Data**

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

Date well drilling started: 2-15-13 Date well drilling completed: 2-15-13

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

Static Water Level: 41 feet above or below (circle one) land surface Date measured: 2-15-13

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

Hole depth: 69 Well depth: 66 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 56 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 56 feet to 66 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 back of page

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

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

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

GREEN WATER WELL & SUPPLY, INC.  
BRIAN D. McCLENDON, UNR-00000664

Brian McClendon  
Signature of Water Well Contractor

Print Name of Water Well Contractor and License No.

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K136

If well telescopes please sketch below and show depths.

Ground Level

Description of Formations Encountered	From	To
red clay	0	18
sand & gravel	18	66
white clay	66	69

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) indicate direction.

84 Hwy

Jackson Liberty Dr

W. Lincoln Dr

well house

Driving

Lincoln School

Landowner Name: Kelvin D. Clark

Brian McClelland 664  
Signature of Water Well Contractor

# 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)

**For Office Use Only:**

Aquifer: \_\_\_\_\_

Well #:     K136    

Elevation: \_\_\_\_\_

County:     Lincoln      
 Permit #: \_\_\_\_\_  
 Driller:     GRENN WATER WELL & SUPPLY, INC.      
 Date completed:     2-18-13    

**This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump.**

Well Owner Information	Well Location
Owner Name: <u>    Kelwin D. Clark    </u>	Latitude: <u>    31° 20' 28" N    </u> Longitude: <u>    90° 34' 18" W    </u>
Mailing Address: <u>    1047 Carter Ave.    </u>	Method of Lat/Long (circle one): Conventional Survey, <u>    Hand-held GPS    </u>
<u>    Baton Rouge, La.    </u> City State Zip Code	USGS quad, <u>    Hand-held GPS    </u> , Survey-grade GPS
Telephone No. <u>    (225) 924-3803    </u>	<u>    NW 1/4 SE 1/4 Sec 24 Twn 6N Rng 6E    </u> SW Distance Direction Nearest Town
	<u>    .5 Miles S of West Lincoln    </u>

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>    .5    </u>
Date Pump Installed: <u>    2-18-13    </u>	Setting Depth: <u>    64    </u> feet
Rated Pump Capacity: <u>    10    </u> Gallons Per Minute	Number of Stages: <u>    9    </u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>    2-18-13    </u>	Air Line <u>    Electric Measuring Line    </u> Steel Tape
Static Water Level (A): <u>    41    </u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>    44    </u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>    3    </u> Feet Below Land Surface	Well yielded <u>    11    </u> GPM with a drawdown of
Test Pumping Rate: <u>    11    </u> Gallons Per Minute	<u>    3    </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.

MICHAEL W. KEES, RPO-00000801

Print Name of Pump Installer and License No. (if applicable)          Michael W. Kees      
 Signature of Pump Installer

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