

County: Licoln.  
 Permit #: \_\_\_\_\_  
 Driller: Fitzgerald Well Suro  
 Date drilling completed: 5-28-08.

**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 #: P-86  
 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>Wilda Bizet</u>	Latitude: <u>31° 23' 24"</u> Longitude: <u>90° 29' 40"</u>
Mailing Address: <u>Dry Creek Rd</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
<u>Bogochito ms</u>	<u>NW 1/4 NW 1/4 Sec 22 Twn 3N Rng 7E</u>
City State Zip Code	Distance Direction Nearest Town <u>2 Miles SW of Bogochito</u>
Telephone No. ( )	

**Well / Borehole Data**

Date drilling started: 5-28-08 Date drilling completed: 5-28-08 Hole depth: 115' Hole diameter: 8"

Location of the source of any surface water used for drilling: \_\_\_\_\_  
 Method of dosing and volume of Chlorine used in drilling and development: \_\_\_\_\_

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*

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: 60' feet above or below (circle one) land surface Date measured: 5-28-08

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

Well depth: 115' Well grouted to a depth of 10' feet Type of grout (circle one) Neat Cement Bentonite Mix

Casing length: 95' feet Casing diameter: 4" inches Type of casing: PVC

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

Screen slot size: 010/012 inches Setting depth: From 95' feet to 115' 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

*pump installed by the warehouse*

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 BY: OLWR



# 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:

County: Leake  
 Permit # \_\_\_\_\_  
 Driller: Fitzgould Well Co.  
 Date completed: 5-28-09

Aquifer: \_\_\_\_\_  
 Well #: P-86  
 Elevation: \_\_\_\_\_

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>Wilda Bizet</u>	Latitude: _____ Longitude: _____
Mailing Address: <u>Bog Creek Rd</u>	Method of Lat/Long (circle one): Conventional Survey
<u>B.C.</u> <u>Ms.</u> City                  State                  Zip Code	USGS quad, Hand-held GPS, Survey-grade GPS _____ 1/4 _____ 1/4 Sec <u>22</u> Twn <u>5N</u> Rng <u>7E</u>
Telephone No. (_____) _____	Distance                  Direction                  Nearest Town <u>2</u> Miles <u>SW</u> of <u>B.C.</u>

Pump Type Circle one	Power Type Circle one
Air Lift                  Jet <u>Submersible</u> Bucket                  Piston                  Turbine Centrifugal                  Rotary                  Flowing Well Other (specify): _____	Diesel Engine                  Gasoline Engine                  Natural Gas <u>Electric Motor</u> Hand                  Tractor PTO Windmill                  Other (specify): _____
Date Pump Installed: <u>6-18-08</u>	Horse Power Rating of Motor: <u>15</u>
Rated Pump Capacity: <u>30</u> Gallons Per Minute	Setting Depth: <u>100</u> feet
	Number of Stages: <u>12</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>6-18-08</u>	Air Line                  Electric Measuring Line <u>Steel Tape</u>
Static Water Level (A): <u>60</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>75</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>15</u> Feet Below Land Surface	Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping
Test Pumping Rate: <u>30</u> 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.

Amos Parker 0305                  Amos Parker  
 Print Name of Pump Installer and License No. (if applicable)                  Signature of Pump Installer

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