

County: Lowndes  
 Permit #: MS-GW-16907  
 Driller: Donald Smith Co., Inc  
 Date drilling completed: 12/11/12

**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 #: E33  
 L. S. Elevation: 205  
 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>Lowndes Co. Ind Dev Auth</u>	Latitude: <u>33° 28' 13N</u> Longitude: <u>88° 36' 18W</u>
Mailing Address: <u>P O Box 1328</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>(Hand-held GPS)</u> Survey-grade GPS
<u>Columbus, MS 39703</u>	<u>NE 1/4 SE 1/4 Sec 34</u> Twn <u>19N</u> Rng <u>16E</u>
City State Zip Code	Distance Direction Nearest Town <u>10</u> Miles <u>W</u> of <u>Columbus, MS</u>
Telephone No. <u>(662) 328-8369</u>	

**Well / Borehole Data**

Date drilling started: 8/6/12 Date drilling completed: 12/11/12 Hole depth: 1507' Hole diameter: 25"

Location of the source of any surface water used for drilling: Public Water Supply  
 Method of dosing and volume of Chlorine used in drilling and development: Potable Water used

Logs run (circle all applicable): No log run (Electric) Gamma Ray Density Sonic Neutron Other: \_\_\_\_\_  
 Name of organization running log(s): MS Office of Geology

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: 67 feet above or (below) (circle one) land surface Date measured: 12/04/12

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

Well depth: 1340 Well grouted to a depth of 1195 feet Type of grout (circle one) (Neat Cement) Bentonite Mix

Casing length: 1195 feet Casing diameter: 20 inches Type of casing: Steel, coated ID

Screen length: 140 feet Screen diameter: 12 inches Type of screen: SS

Screen slot size: .030 inches Setting depth: From 1200 feet to 1340 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*

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 JAN 25 2013  
 BY: OLWR

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	
Dirt Black	0	7
Chalk, Brown yellow	7	18
Chalk Tough Blue	18	46
Marl rock streaks Tough Very Hard	46	92
Marl Tough	92	194
Rock Chippy	194	200
Marl Tough Rock Streaks	200	242
Sand Rock Streaks	242	289
Rock Very Hard	289	292
Sand, Tight	292	315
Marl Sandy Rock Strks	315	331
Rock & Sand Rough	331	367
Sand	367	377
Rock & Sand Rough	377	414
Marl Sand Strks	414	479
Sand Marl Strks	479	522
Marl Tough	522	617
Marl Very Tough	617	669
Sand Marl Strks	669	678
Marl Tough Sand Strks	678	716
Sand	716	789
Marl Tough Sand Gravel Strks	789	803
Gravel Sand & Marl	803	1000'

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: \_\_\_\_\_

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.

Donald Smith 0-767 1/23/13  
 Print Name of Responsible Licensee and License No. Date

Donald Smith  
 Signature of Licensee

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1000' – 1035'	Gravel and Red Marl
1035' – 1085'	Marl Very Tough
1085' – 1141'	Marl Sand Streaks
1141' – 1143'	Rock Hard
1143' – 1148'	Marl Tough
1148' – 1180'	Sand Marl Rock Streaks
1180' – 1190'	Sand
1190' – 1220'	Sand Tough Streaks
1220' – 1246'	Sand Tight
1246' – 1250'	Marl
1250' – 1318'	Sand Rock Streaks
1318' – 1346'	Sand
1346' – 1361'	Sand Tighter
1361' – 1401'	Rock Marl & Gravel
1401' – 1413'	Sand Tight Spots
1413' – 1423'	Marl
1423' – 1441'	Sand Marl Streaks
1441' – 1461'	Rock Marl Streaks
1461' – 1505'	Marl Sand Streaks

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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: Lowndes  
 Permit #: MS-GW-16907  
 Driller: Donald Smith Co  
 Date completed: 7/19/13  
*Copy information from block on Part 1*

For Office Use Only:

Aquifer: \_\_\_\_\_  
 Well #: 4 E33  
 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>Lowndes Co. Ind Dev Auth</u> Mailing Address: <u>PO Box 1328</u> <u>Columbus MS 39730</u> <small>City State Zip Code</small> Telephone No. <u>(662)328-8369</u>	Latitude: <u>33 28 13N</u> Longitude: <u>88 36 18W</u> Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____ <u>1/4</u> <u>1/4</u> Sec <u>34</u> T <u>19N</u> R <u>16E</u> Distance Direction Nearest Town <u>10</u> Miles <u>W</u> of <u>Columbus, MS</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet Submersible Bucket Piston <input checked="" type="radio"/> Turbine Centrifugal Rotary Flowing Well Other (specify): _____ Date Pump Installed: <u>6/10/13</u> Rated Pump Capacity: <u>1500</u> Gallons Per Minute	Diesel Engine Gasoline Engine Natural Gas <input checked="" type="radio"/> Electric Motor Hand Tractor PTO Windmill Other (specify): _____ Horse Power Rating of Motor: <u>250</u> Setting Depth: <u>222</u> feet Number of Stages: <u>7</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>6/21/13</u> Static Water Level (A): <u>79.68</u> Feet Below Land Surface Pumping Water Level (B): <u>146.12</u> Feet Below Land Surface Drawdown [(B) - (A)]: <u>66.44</u> Feet Below Land Surface Test Pumping Rate: <u>1600</u> Gallons Per Minute Duration of Pump Test (minimum 4 hours): <u>4</u> hours	Air Line <input checked="" type="radio"/> Electric Measuring Line <input checked="" type="radio"/> <del>Steel Tape</del> Other (specify): _____ For flowing well, measured shut in head: _____ feet Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping

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

Robert L. Young, Jr. UNR-5671  
 Print Name of Pump Installer and License No. (if applicable)

Robert Young  
 Signature of Pump Installer