

**State Well Report  
Part I - 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)

County: Marshall  
Permit #: 0-162  
Driller: Larry Cooper  
Date drilling completed: 6-26-06

For Office Use Only:

Aquifer: \_\_\_\_\_  
Well #: F-102  
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 <small>(Landowner if borehole is not for a water well)</small>	Well or Borehole Location
Owner Name: <u>Bill Taylor</u>	Latitude: <u>34°56'30"</u> Longitude: <u>89°30'19"</u>
Mailing Address: <u>2 Memphis Ave.</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>
<u>Int. Pleasant</u> <u>Ms.</u> <u>38066</u>	USGS quad, Hand-held GPS, Survey-grade GPS
City State Zip Code	<u>SE 1/4 NW 1/4 Sec. 3 Twn 25 Rng 3W</u>
Telephone No. <u>(664) 851-3213</u>	Distance Direction Nearest Town
	<u>1 Miles South of Int. Pleasant</u>

**Well / Borehole Data**

Date drilling started: 6-26-06 Date drilling completed: 6-26-06 Hole depth: 160' 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: Well Water  
1/2 Pp Chlorine to 1000 Gall Water

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 of below (circle one) land surface Date measured: 6-26-06

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

Well depth: 160' Well grouted to a depth of 10' feet Type of grout (circle one) Neat Cement Bentonite Mix

Casing length: 150 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 10 feet Screen diameter: 4 inches Type of screen: PVC

Screen slot size: .013 inches Setting depth: From 150 feet to 160 feet

Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development

Other (describe): \_\_\_\_\_

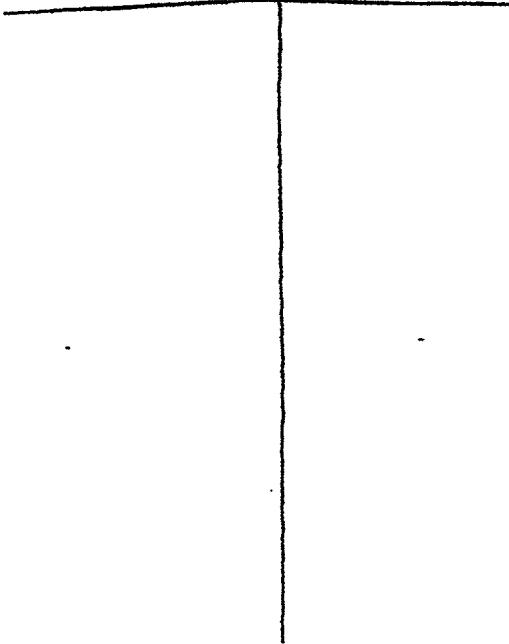
Top of lap pipe or reduction in casing: \_\_\_\_\_ feet. *If telescoped or more than one screen, describe on next page.*

F-102

The sketch below only required for water wells

If well telescopes, show depths on sketch.

Ground Level \_\_\_\_\_

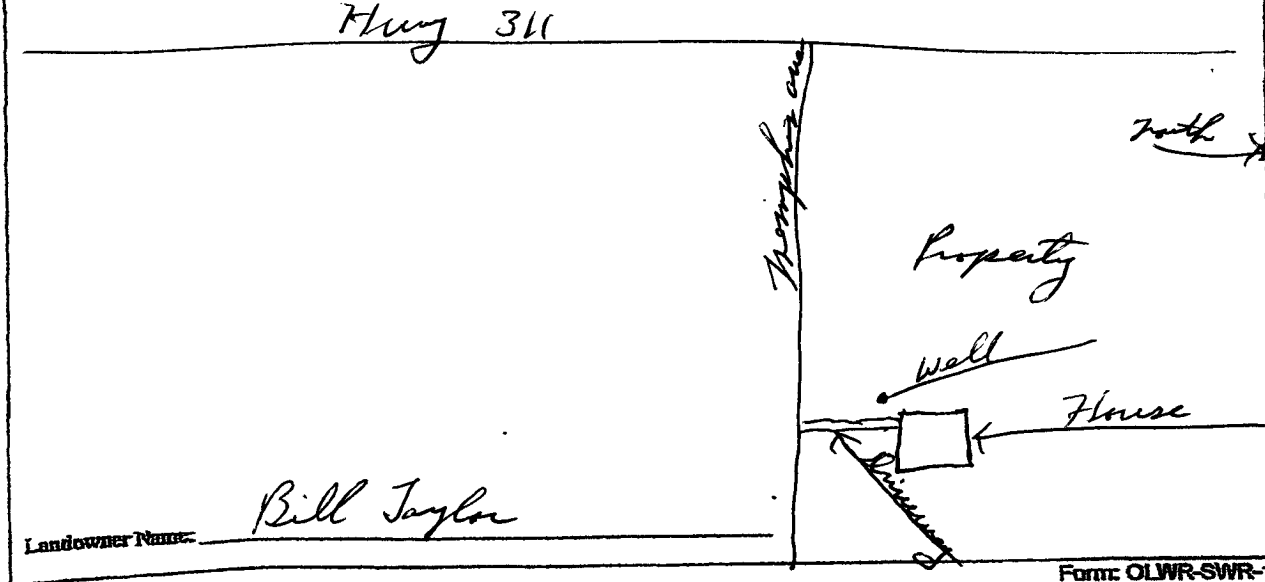


Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth)	To (depth)
<del>Surface Soil</del>	Ground Level	
Surface Soil	0	20
Red Red Sand	20	45
Red White Sand	45	75
White Clay	75	89
Red White Sand	89	130
White coarse Sand	130	160

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.



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.

LARRY CARPENTER 0-166 7-6-06  
Print Name of Responsible Licensee and License No. Date

Larry Carpenter  
Signature of Licensee

# 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: Mississippi  
 Permit #: 0-162  
 Driller: Larry Carpenter  
 Date completed: 6-26-06  
*Copy information from block on Part 1*

For Office Use Only:

Aquifer: \_\_\_\_\_  
 Well #: F-10a  
 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>Bill Taylor</u> Mailing Address: <u>2 Memphis ave</u> <u>Mt. Pleasant, MS 38066</u> <small>City State Zip Code</small> Telephone No. <u>(662) 851-3213</u>	Latitude: _____ Longitude: _____ Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____ <u>1/4</u> _____ <u>1/4</u> Sec. <u>3</u> T <u>25</u> R <u>3W</u> Distance _____ Direction _____ Nearest Town _____ <u>1</u> Miles <u>South</u> of <u>Mt. Pleasant</u>

Pump Type Circle one	Power Type Circle one
Air Lift _____ Jet _____ <u>Submersible</u> Bucket _____ Piston _____ Turbine _____ Centrifugal _____ Rotary _____ Flowing Well _____ Other (specify): _____ Date Pump Installed: <u>6-26-06</u> Rated Pump Capacity: <u>10</u> Gallons Per Minute	Diesel Engine _____ Gasoline Engine _____ Natural Gas _____ Electric Motor _____ Hand _____ Tractor PTO _____ Windmill _____ Other (specify): _____ Horse Power Rating of Motor: <u>3/4</u> Setting Depth: <u>100</u> feet Number of Stages: <u>11</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: _____ Static Water Level (A): <u>60</u> Feet Below Land Surface Pumping Water Level (B): <u>64</u> Feet Below Land Surface Drawdown [(B)-(A)]: <u>4</u> Feet Below Land Surface Test Pumping Rate: <u>16</u> Gallons Per Minute Duration of Pump Test (minimum 4 hours): <u>4</u> hours	Air Line _____ Electric Measuring Line _____ <u>Steel Tape</u> Other (specify): _____ For flowing well, measured shut in head: _____ feet Well yielded <u>16</u> GPM with a drawdown of <u>4</u> feet after <u>4</u> hours of pumping

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

LARRY CARPENTER 0-162      Larry Carpenter  
 Print Name of Pump Installer and License No. (if applicable)      Signature of Pump Installer