

State Well Report

Part 1 - 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)961- 5228 (fax)

County: Marshall
Permit #: _____
Driller: Jones W. Mason
Date drilling completed: 5-26-09

For Office Use Only:
Aquifer: _____
Well #: J 303
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>Kenny Dunlop</u>	Latitude: <u>34° 50' 14"</u> Longitude: <u>89° 34' 82"</u>
Mailing Address: <u>544 Church rd</u>	Method of Lat/Long (circle one): Conventional Survey, <u>9"</u> <u>52"</u>
<u>Red Banks MS 38661</u>	USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS
City State Zip Code	<u>NW 1/4 SW 1/4 Sec 12 Twn 3S Rng 4W</u>
Telephone No. <u>(901) 490-3066</u>	Distance Direction Nearest Town <u>3/4 Miles NW of Red Banks</u>

Well / Borehole Data

Date drilling started: 5-26-09 Date drilling completed: 5-26-09 Hole depth: 170' Hole diameter: 6 3/4"

Location of the source of any surface water used for drilling: NA

Method of dosing and volume of Chlorine used in drilling and development: NA

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

Name of organization running log(s): NA

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 NA Other (describe) _____

Static Water Level: 100 feet above or below (circle one) land surface Date measured: 5-28-09

Method of Measurement (circle one) steel tape electric tape air line other: string/weight

Well depth: 170 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: 20 feet Screen diameter: 4 inches Type of screen: pvc

Screen slot size: .010 inches Setting depth: From 150 feet to 170 feet

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

Other (describe): NA

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

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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 2309
Jackson, MS 39225
(601)961-5210
(601)961-5228 (fax)

County: Marshall
Permit #:
Driller: Jones W. Mason
Date completed: 5-28-09
Copy information from block on Part 1

For Office Use Only:
Aquifer:
Well #: J303
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: Owner Name: Kenny Dunlap, Mailing Address: 544 church rd, Red Banks MS 38661, Telephone No. (901) 490-3066
Well Location: Latitude: 34.50-144, Longitude: 89.34.872, Method of Lat/Long: Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS, Distance: 3/4 Miles NW of Red Banks

Pump Type: Air Lift, Jet, Submersible, Bucket, Piston, Turbine, Centrifugal, Rotary, Flowing Well, Other (specify):
Power Type: Diesel Engine, Gasoline Engine, Natural Gas, Electric Motor, Hand, Tractor PTO, Windmill, Other (specify):
Date Pump Installed: 5-28-09
Rated Pump Capacity: 10 Gallons Per Minute
Horse Power Rating of Motor: 3/4
Setting Depth: 140 feet
Number of Stages: 8

Pump Test Data: Date Well Tested: 5-28-09, Static Water Level (A): 100 Feet Below Land Surface, Pumping Water Level (B): NA Feet Below Land Surface, Drawdown [(B) - (A)]: NA Feet Below Land Surface, Test Pumping Rate: 10 Gallons Per Minute, Duration of Pump Test (minimum 4 hours): 24 hours
Method of Measuring Water Level: Air Line, Electric Measuring Line, Steel Tape, Other (specify): strings / weight, For flowing well, measured shut in head: NA feet, Well yielded 10 GPM with a drawdown of NA feet after 24 hours of pumping

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.
Print Name of Pump Installer and License No. (if applicable): Jones W. Mason 0-620
Signature of Pump Installer: Jones W. Mason