





# 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 39225-2309  
(601)961-5210  
(601) 360-0535 (fax)

County: Marshall  
Permit #: 0-162  
Driller: Larry Carpenter  
Date completed: 1-1-14  
*Copy information from block on Part 1*

**For Office Use Only:**  
Well #: N115  
Aquifer: \_\_\_\_\_

*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>Charles Vaughn</u>	Latitude: <u>34° 48.619</u> Longitude: <u>89° 26.517</u>
Mailing Address: <u>3913 Maranna Rd</u>	Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____, Hand-held GPS <u>X</u> , Survey-grade GPS _____
<u>Holly Springs</u> MS <u>38634</u>	_____ 1/4 _____ 1/4, Sec <u>24</u> T. <u>45</u> R. <u>4W</u>
City State Zip Code	<u>1</u> Miles <u>East</u> of <u>Maranna</u>
Telephone No. <u>(662) 812-9788</u>	(Distance) (Direction) (Nearest Town)

**Pump Type (circle one)**  
 Submersible  Turbine  Air Lift  Centrifugal  Flowing Well  Jet  Piston  Rotary  Other (describe): \_\_\_\_\_  
Date Pump Installed: 1-1-14 Rated Pump Capacity: 12 Gallons Per Minute  
Is This Pump (circle one):  New  Repaired  Replacement

**Power Type (circle one)**  
 Electric  Diesel  Gasoline  Natural Gas  Tractor PTO  Windmill  Other (describe): \_\_\_\_\_  
Horse Power Rating of Motor: 3/4 Setting Depth: 145 feet Number of Stages: 11

**Pump Test Data for Non Flowing Well**  
Date Well Tested: 1-1-14 Duration of Pump Test (minimum 4 hours): 4 hours  
Static Water Level (A): 125 Feet Below Land Surface Pumping Water Level (B): 130 Feet Below Land Surface  
Drawdown [(B) - (A)]: 5 Feet Below Land Surface Test Pumping Rate: 15 Gallons Per Minute  
Method of measurement (circle one):  Steel tape  Electric tape  Air line  Other (describe): \_\_\_\_\_

**Pump Test Data for Flowing Well**  
Measured shut in head: \_\_\_\_\_ feet.  
Well yielded \_\_\_\_\_ GPM with a drawdown of \_\_\_\_\_ feet after \_\_\_\_\_ hours of pumping

**Meter Installation**  
Meter Manufacturer: \_\_\_\_\_ Meter Serial Number: \_\_\_\_\_  
Meter Model Number/Name: \_\_\_\_\_ Type of Meter: \_\_\_\_\_  
Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): \_\_\_\_\_  
Installation Date: \_\_\_\_\_ Meter installed by: \_\_\_\_\_  
Is This Meter (circle one):  New  Repaired  Replacement

**Important:** By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.  
Larry Carpenter #0-162 1-2-14 Larry Carpenter  
Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer