

This hole was deepened to 1227 on 2/22/10

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)

County: Montgomery Permit #: Driller: Kattiff water well Date drilling completed: 11-25-09

For Office Use Only: Aquifer: Well #: J34 L. S. Elevation: E-log #:

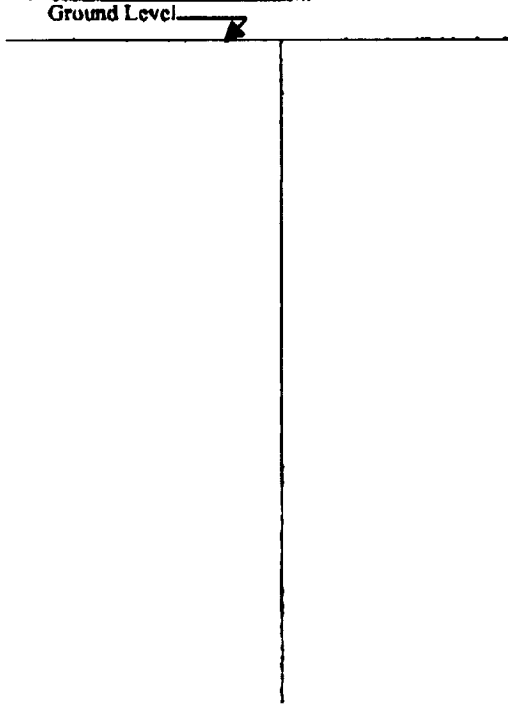
State Law requires that this report be prepared by the license holder responsible for the work and filed with the Department at the above address within 30 days of completion of drilling of the well or borehole.

Information on Well Owner (Landowner if borehole is not for a water well) Owner Name: South Winona Water Mailing Address: 723 Enterprise Dr. Winona MS 38967 Well or Borehole Location Latitude: 33° 27' 20" Longitude: 89° 43' 19" Method of Lat/Long: Conventional Survey. USGS quad, Hand-held GPS, Survey-grade GPS NW 1/4 NE 1/4 Sec 6 Twn 18N Rng 6E

Well / Borehole Data Date drilling started: 11-19 Date drilling completed: 11-25 Hole depth: 1020' Hole diameter: 5 1/2" Location of the source of any surface water used for drilling: South Winona water 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): Miss Geol Survey Purpose of borehole (check one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump Seismic Survey Other (describe): Test Hole # 2 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: Test Hole If a flowing well, method of flow regulation: Valve Other (describe) Static Water Level: feet above or below (circle one) land surface Date measured: Method of Measurement (circle one) steel tape electric tape air line other: Well depth: Well grouted to a depth of feet Type of grout (circle one): Neat Cement Bentonite Mix Casing length: feet Casing diameter: inches Type of casing: Screen length: feet Screen diameter: inches Type of screen: Screen slot size: inches Setting depth: From feet to 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

The sketch below only required for water wells

If well telescopes, show depths on sketch



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)
Clay	Ground Level	40
Smudgy clay	40	70
sand	70	130
clay	130	140
Sam 2	140	180
shale	180	210
sand w/clay	210	240
shale	240	270
clay	270	280
sand	280	330
clay	330	410
sand	410	510
clay w/sand streaks	510	670
shale	670	70
sand w/clay	700	780
clay	780	820
sand	820	870
clay	870	890
Rock	890	
sand	890	920
Hard clay	920	950
Shale	950	1000
Rock	1000	
Shale	1000	1020

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.

Robert Ratzliff 0-002  
 Print Name of Responsible Licensee and License No.

12-1-09  
 Date

Robert Ratzliff  
 Signature of Licensee

According to John Marble, the original hole was deepened. TO: 16019615228

County: Montgomery  
 Permit #: \_\_\_\_\_  
 Driller: Katiff water well  
 Date drilling completed: 2-22-10

**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 #: 071  
 L. S. Elevation: J34  
 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>South winona water</u>	Latitude: <u>33° 27' 20"</u> Longitude: <u>89° 42' 19"</u>
Mailing Address: <u>723 Enterprise Dr.</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
<u>Winona MS 38967</u>	<u>NW 1/4 NE Sec 6 Twn 18N Rng 6E</u>
City State Zip Code	Distance Direction Nearest Town Miles of
Telephone No. ( )	

**Well / Borehole Data**

Date drilling started: 11-19 Date drilling completed: 2-22-10 Hole depth: 1227' Hole diameter: 8 1/4"

Location of the source of any surface water used for drilling: South winona water

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): MS Geol Survey

Purpose of borehole (check one): Water Well  Geotechnical/Geological Investigation  Ground Source Heat Pump   
 Seismic Survey  Other (describe) Test well ONLY

*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: 194.25 feet above or  below (circle one) land surface Date measured: 2-25-10

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

Well depth: 1045 Well grouted to a depth of \_\_\_\_\_ feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 1005 feet Casing diameter: 4" inches Type of casing: Steel

Screen length: 40 feet Screen diameter: 4" inches Type of screen: 55 steel

Screen slot size: .13 inches Setting depth: From 1005 feet to 1045 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: N/A feet. *If telescoped or more than one screen, describe on next page*

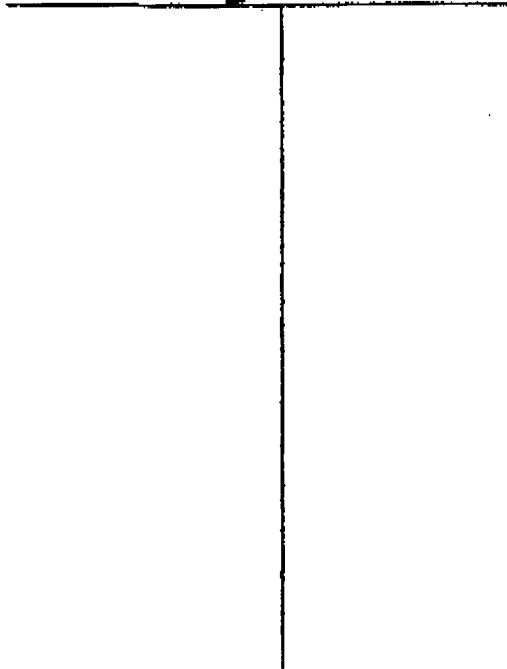
J34

The sketch below only required for water wells

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

If well telescopes, show depths on sketch

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



Description of Formations Encountered	From (depth)	To (depth)
Clay	Ground Level	40
Sandy clay	40	70
sand	70	130
clay	130	140
sand	140	180
shale	180	210
sand w/clay	210	240
shale	240	270
clay	270	290
sand	290	330
clay	330	410
sand	410	510
clay / w/sand/shale	510	680
shale	680	700
sand w/clay	700	780
clay	780	820
sand	820	870
clay	870	890
rock	890	
sand	890	920
Hard clay	920	950
shale	950	1000
Rock	1000	
Shale	1000	1020
Sand	1020	1060
clay	1060	1100

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.

shale	1100	1140
Rock	1130	
shale	1140	1180
Rock	1176	
sand	1180	1220
Rock	1210	
clay	1210	1227

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.

Robert Rothoff 0-002

3-2-10

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee

# STATE WELL REPORT

534

County: Montgomery  
 Permit #: \_\_\_\_\_  
 Driller: Ratliff water well  
 Date completed: 2-26-10  
 Copy information from block on Part 1

**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:**  
 Aquifer: \_\_\_\_\_  
 Well #: \_\_\_\_\_  
 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>South Winona Water</u>	Latitude: _____ Longitude: _____
Mailing Address: <u>723 Enterprise</u>	Method of Lat/Long (check one): Conventional Survey _____
<u>Winona, MS</u> <u>38967</u>	USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
City State Zip Code	_____ 1/4 _____ 1/4 Sec <u>6</u> T <u>14N</u> R <u>6E</u>
Telephone No. ( ) _____	Distance Direction Nearest Town
	_____ Miles _____ of _____

Pump Type Circle one	Power Type Circle one
Air Lift Jet <input checked="" type="radio"/> <u>Submersible</u>	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston Turbine	<input checked="" type="radio"/> <u>Electric Motor</u> Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>10hp</u>
Date Pump Installed: <u>2-24-10</u>	Setting Depth: <u>380</u> feet
Rated Pump Capacity: <u>75</u> Gallons Per Minute	Number of Stages: _____

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>2-25-10</u>	Air Line <input checked="" type="radio"/> <u>Electric Measuring Line</u> Steel Tape
Static Water Level (A): <u>194.25</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>378</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>183.75</u> Feet Below Land Surface	Well yielded <u>75</u> GPM with a drawdown of
Test Pumping Rate: <u>75</u> Gallons Per Minute	<u>183.75</u> feet after <u>24</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>24</u> hours	

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

Robert Ratliff 0-002  
 Print Name of Pump Installer and License No. (if applicable)

[Signature]  
 Signature of Pump Installer