

# State Well Report

Part 1

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: Newton  
 Permit #: \_\_\_\_\_  
 Driller: McDonnell & Heil  
 Date drilling completed: 12-19-05

For Office Use Only:  
 Aquifer: \_\_\_\_\_  
 Well #: H-24  
 L. S. Elevation: \_\_\_\_\_  
 E-log #: \_\_\_\_\_

State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.

Well Owner Information	Well Location
Owner Name: <u>Charg Thaggard</u>	Latitude: <u>32° 28' 20"</u> Longitude: <u>91° 00' 14"</u>
Mailing Address: <u>12623 Hickory Ln, Little Rock MS 39327</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
City: <u>Little Rock</u> State: <u>MS</u> Zip Code: <u>39327</u>	<u>SE</u> ¼ <u>SE</u> ¼ Sec <u>7</u> Twn <u>7N</u> Rng <u>13E</u>
Telephone No: <u>(601)-635-5296</u>	Distance: <u>7</u> Miles Direction: <u>N</u> of Nearest Town: <u>Hickory</u>

Well # 2

Purpose of well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other: Chickens

Date well drilling started: 12-12-05 Date well drilling completed: 12-19-05

If flowing, method of flow regulation: Valve \_\_\_\_\_ Other (describe) \_\_\_\_\_

Static Water Level: 170 feet above or below (circle one) land surface Date measured: \_\_\_\_\_

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

Hole depth: 240 Well depth: \_\_\_\_\_ Well grouted to a depth of 20 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 220 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 20 feet Screen diameter: 4 inches Type of screen: PVC Johnson

Screen slot size: .008 inches Setting depth: From 200 feet to 220 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 back of page

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

Name of organization running log(s): \_\_\_\_\_

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I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

McDonnell & Heil, Inc. # 0-8  
Print Name of Water Well Contractor and License No.

Harold Heil  
Signature of Water Well Contractor



# STATE WELL REPORT

## Part 2

County: Newton  
 Permit #: \_\_\_\_\_  
 Driller: McDonald & Heil  
 Date completed: 1-9-06

**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 #: H-24  
 Elevation: \_\_\_\_\_

This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump.

Well Owner Information	Well Location
Owner Name: <u>Craig Thaggard</u>	Latitude: _____ Longitude: _____
Mailing Address: <u>12623 - Hickory Hill Road</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
<u>Cattle Rock MS - 39327</u> City State Zip Code	1/4 _____ 1/4 Sec <u>7</u> Twn <u>7N</u> Rng. <u>13E</u>
Telephone No: <u>601-635-5296</u>	Distance _____ Direction _____ Nearest Town _____ <u>7</u> Miles <u>N</u> of <u>Hickory</u>

Pump Type Circle one	Power Type Circle one
Air Lift      Jet <u>Submersible</u>	Diesel Engine      Gasoline Engine      Natural Gas
Bucket      Piston      Turbine	<u>Electric Motor</u> Hand      Tractor PTO
Centrifugal      Rotary      Flowing Well	Windmill      Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>2</u>
Date Pump Installed: <u>1-9-06</u>	Setting Depth: <u>180</u> feet
Rated Pump Capacity: <u>20</u> Gallons Per Minute	Number of Stages: <u>12</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>1-9-06</u>	Air Line      Electric Measuring Line      Steel Tape
Static Water Level (A): <u>120</u> Feet Below Land Surface	Other (specify): <u>String</u>
Pumping Water Level (B): <u>180</u> Feet Below Land Surface	For flowing well, measured shut in head: <u>100</u> feet
Drawdown [(B) - (A)]: <u>30</u> Feet Below Land Surface	Well yielded <u>30+</u> GPM with a drawdown of
Test Pumping Rate: <u>25+</u> Gallons Per Minute	<u>30+</u> feet after <u>4</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>4</u> hours	

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

McDonald & Heil, Inc. #0-8      Harold Heil  
 Print Name of Pump Installer and License No. (if applicable)      Signature of Pump Installer

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