County:	Panola
Permit #:	GW-44856 √
Driller:	Irrigation Equipment
Date drilli	ng completed: 01/05/2012

## **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)

	For Office Use Only:	
Aquifer:	Y55	
Well #:		
L.S. Elev	ation:	
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	Nolan West	Latitude: 34 ° 16 ' 28 " Longitude: 90 ° 07 ' 10 "				
Mailing Address:	266 Walnut Road	Method of Lat/Long (check one):   Conventional Survey,				
		☐ USGS quad, ☐ Hand-held GPS, ☐ Survey-grade GPS				
	Sardis Ms 38666	SE 1/4 NW 1/4 Sec 26 Twn 98 Rng 9W				
	City State Zip code	Distance Direction Nearest Town				
Telephone No.	-	Miles of _E Locke Station				
	Well / Bo	prehole Data				
Date drilling starte	ed: 01/05/2012 Date drilling completed: 01/0	<b>D5/2012</b> Hole depth: <b>104</b> Hole diameter: <b>24</b>				
Location of the so	urce of any surface water used for drilling: Surface	Water				
Method of dosing	and volume of Chlorine used in drilling and developm	ent: 50 PPM				
	Logs run (check all applicable): No log run					
Purpose of boreho	le (check one): Water Well Geotechnical	/Geological Investigation Ground Source Heat Pump				
	Seismic Survey Other (a	lescribe)				
If drilling is not related to water well construction, skip the remainder of this block						
Purpose of Well (c	check one) 🔲 Home 📋 Industrial 📋 Public Sup	pply 🛮 Irrigation 🔲 Fish Culture 📋 Other:				
If flowing, method of flow regulation: Valve Other (describe)						
Static Water Level: feet above or below (check one)						
Method of Measurement (check one) ☐ steel tape ☐ electric tape ☐ air line ☐ other:						
Well depth: 104 Well grouted to a depth of 10 feet Type of grout (check one): ☐ Neat Cement ☒ Bentonite ☐ Mix						
Casing length: 64 feet Casing diameter: 16 inches Type of casing: PVC						
Screen length:	feet Screen diameter: 16	inches Type of screen: PVC				
Screen slot size:	.050 inches Setting depth: From	feet to 99 icc feet				
Type of completion	n (check all applicable): 🛛 Gravel packed 🔲 U	Inderreamed    Telescoped    Open hole    Natural Development				
	Other (describe): Ci	rcle S Irrigation will set pump				
Top of lap pipe or	reduction in casing: feet. If	telescoped or more than one screen, describe on next page				
		Form: OLWR-SWR-1A (04/08)				

JAN 2 3 2012 BY: OLWR

well telescopes, show depths on sketch.	wells and boreholes, unless specifically exer	npted by regulations	Ē
Ground level	Description of Formations Encountered	From (depth)	To (depth)
Grown 1979.	Clay	Ground level	21
	Fine Sand	22	38
	Fine Sand & Gravel	39	44
	Medium Sand & Gravel	45	99
	Fine Sand & Clay	100	104
	(100-104) 5' Blanked on bottom		
If more than one screen, show location of each on sl	ketch		711
Sketch the property layout and include the following aid in locating the well; 3) any 4) a north arrow.	lowing: 1) the well location; 2) any permanent structures on roads, power lines, or other items that may aid in locating the	the property that ne property and the	t may he well;

Sketch the property l	layout and include the following: 1) the well location; 2) any permanent structures or	the property that may
aid ir	n locating the well; 3) any roads, power lines, or other items that may aid in locating to	the property and the well;
4) a i	north arrow.	
:		
Landowner Name:	Nolan West	
		Form: OLIMP CIMP 44 (04/00)

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. Patrick Chism / Irrigation Equipment 0695 01/18/2012

Print Name of Responsible Licensee and License No.

gnature of Licensee

## STATE WELL REPORT County: PANOLA Part 2 For Office Use Only: **Pump Installer's Completion Report** Permit #: GW- 44856 Mississippi Department of Environmental Quality Office of Land and Water Resources Driller: IRRIGATION EQUIPMENT P.O. Box 2309 Jackson, MS 39225 Well #: Date completed: ノーケール (601)961-5210 Elevation: (601)961-5228 (fax) Copy information from block on Part 1 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 NOLAN WEST Owner Name: Latitude: 34.16. 27.95. Longitude: 90.07. 10.4 Mailing Address: 266 Wayner 20 Method of Lat/Long (check one): Conventional Survey USGS quad\_\_\_\_, Hand-held GPS\_\_\_, Survey-grade GPS\_\_\_ NE 49 W 4 Sec 26 T 95 R 9W Distance Direction Nearest Town Telephone No. (442) 487-3858 2 Miles E of Locks Station Pump Type Power Type Circle one Circle one Air Lift Jet Submersible Diesel Engine Gasoline Engine Natural Gas Bucket Piston Turbine) Electric Motor Hand Tractor PTO Centrifugal Rotary Flowing Well Windmill Other (specify): \_\_\_ Other (specify): Horse Power Rating of Motor: 60 Date Pump Installed: 3.5-/2 Setting Depth: <u>70</u> feet Rated Pump Capacity: \_3000 Gallons Per Minute Number of Stages: Pump Test Data Method of Measuring Water Level Circle one Date Well Tested: Air Line Electric Measuring Line Steel Tape Static Water Level (A): \_\_\_\_\_ Feet Below Land Surface Other (specify): Pumping Water Level (B): \_\_\_\_ Feet Below Land Surface Drawdown [(B) - (A)]: \_\_\_\_\_\_Feet Below Land Surface For flowing well, measured shut in head: \_\_\_\_\_ feet Test Pumping Rate: Gallons Per Minute Well yielded \_\_\_\_\_ GPM with a drawdown of Duration of Pump Test (minimum 4 hours): \_\_\_\_\_hours feet after 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)

Form: OLWR-SWR-1B (04/08)

Signature of Pump Installer