

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

County: PANOLA  
 Permit #: \_\_\_\_\_  
 Driller: RATLIFF Water Well  
 Date drilling completed: 11-8-13

**For Office Use Only:**  
 Well #: 577  
 Aquifer: \_\_\_\_\_  
 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.*

<b>Well Owner Information</b> (Landowner if borehole is not for a water well). Owner Name: <u>Steve Tidwell</u> Mailing Address: <u>2467 LAWRENCE BROS ROAD</u> <u>Batesville</u> <u>Ms.</u> <u>38606</u> City State Zip Code Telephone No. ( ) _____		<b>Well or Borehole Location</b> Latitude: <u>N 34° 17' 37.8"</u> Longitude: <u>W 089° 49' 57.4"</u> Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____, Hand-held GPS <u>X</u> , Survey-grade GPS _____ <u>NW ¼ NE ¼, Sec 21 T 9S R 6W</u> <u>5</u> Miles <u>SE</u> of <u>Batesville</u> (Distance) (Direction) (Nearest Town)	
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**Well / Borehole Data**

Date drilling started: 11-5-13 Date drilling completed: 11-8-13 Hole depth: 260' Hole diameter: 7 1/2"

Location of the source of any surface water used for drilling: WATER SYSTEM

Method of dosing and volume of Chlorine used in drilling and development: 50 ppm

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

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

Purpose of borehole (circle 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 (circle all applicable): Home Industrial Public Supply  Irrigation Fish Culture

Other (describe): \_\_\_\_\_

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

Static Water Level: 133 feet [above or  below] land surface Date measured: 11-9-13  
 (circle one)

Method of measurement (circle one): Steel tape  Electric tape Air line Other (describe): \_\_\_\_\_

Well depth: 260' Well grouted to a depth of: 10 feet Type of grout (circle one):  Neat Cement Bentonite Mix

Casing length: 230 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 30 feet Screen diameter: 4 inches Type of screen: PVC

Screen slot size: .013 inches Setting depth: From 230 feet to 260 feet

Type of completion (circle all applicable): Gravel packed Underreamed 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*



### 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: PANOLA  
 Permit #: \_\_\_\_\_  
 Driller: KATLIFF Water Well  
 Date completed: 11-18-13  
*Copy information from block on Part 1*

**For Office Use Only:**  
 Well #: 579  
 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>Steve Tidwell</u>	Latitude: <u>N 34° 17' 37.8"</u>		Longitude: <u>W 089° 49' 57.9"</u>		
Mailing Address: <u>2467 LAWRENCE BRAS ROAD</u>	Method of Lat/Long (check one): Conventional Survey _____		USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____		
<u>Batesville MS 38606</u>	City State Zip Code		_____ 1/4 _____ 1/4, Sec <u>21</u> T <u>9S</u> R <u>6W</u>		
Telephone No. ( ) _____	_____		<u>5</u> Miles <u>SE</u> of <u>Batesville</u> (Distance) (Direction) (Nearest Town)		

**Pump Type (circle one)**  
 Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe): \_\_\_\_\_  
 Date Pump Installed: 11-12-13 Rated Pump Capacity: 25 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 Setting Depth: 160 feet Number of Stages: 15

**Pump Test Data for Non Flowing Well**  
 Date Well Tested: 11-15-13 Duration of Pump Test (minimum 4 hours): 4 hours  
 Static Water Level (A): 123 Feet Below Land Surface Pumping Water Level (B): 143 Feet Below Land Surface  
 Drawdown [(B) - (A)]: 20 Feet Below Land Surface Test Pumping Rate: 35 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 35 GPM with a drawdown of 20 feet after 4 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.  
Robert E. Katliff 0-002 11-18-13 Robert E. Katliff  
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer