

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)

For Office Use Only:

Aquifer:
Well #: F-71
L. S. Elevation:
E-log #:

County Pearl River 109
Permit #
Driller: John W. Thompson
Date drilling completed: 12-29-04

Thompson Brothers Water Well Service

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: Gungoll Exploration, P.O. Box 18466, Oklahoma City, OK 73154
Well Location: Latitude 30° 49', Longitude 89° 37', Method of Lat/Long: Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS, 1/4 SE 1/4 Sec 31 Twn 25 Rng 16W, Distance 6 Miles Direction W of Rylarville

Well Data: Purpose of Well (circle one) Other: rig supply
Date well drilling started: 12-29-04 Date well drilling completed: 12-29-04
Static Water Level: 31 feet above or below (circle one) land surface Date measured: 12-29-04
Method of Measurement (circle one) electric tape
Hole depth: 110 Well depth: 108 Well grouted to a depth of 10 feet
Type of grout (circle one): Bentonite
Casing length 88 feet Casing diameter: 4 inches Type of casing: PVC
Screen length 20 feet Screen diameter: 4 inches Type of screen: PVC slotted
Screen slot size: .020 inches Setting depth: From 88 feet to 108 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):

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.

John W. Thompson 0-0679
Print Name of Water Well Contractor and License No.

John W. Thompson
Signature of Water Well Contractor

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JAN 10 2005
BY: OLWR

STATE WELL REPORT

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 #: F-71

Elevation: _____

County: Pearl River
Permit #: _____
Driller: John W. Thompson
Date completed: 12-29-04

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>Gungoll Exploration</u>	Latitude: <u>30° 49'</u> Longitude: <u>89° 37'</u>
Mailing Address: <u>P.O. Box 18466</u>	Method of Lat/Long (circle one): Conventional Survey
<u>Oklahoma City, OK 73154</u>	USGS quad, Hand-held GPS, Survey-grade GPS
City State Zip Code	<u>1/4 SE 1/4 Sec 31 Twn 25 Rng 16W</u>
Telephone No. (____) _____	Distance Direction Nearest Town
	<u>6 Miles W of Poplarville</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet <input type="radio"/> <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>5</u>
Date Pump Installed: <u>12-30-04</u>	Setting Depth: <u>80</u> feet
Rated Pump Capacity: <u>85</u> Gallons Per Minute	Number of Stages: _____

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>12-30-04</u>	Air Line Electric Measuring Line <input checked="" type="radio"/> <u>Steel Tape</u>
Static Water Level (A): <u>31</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>50</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>19</u> Feet Below Land Surface	Well yielded <u>105</u> GPM with a drawdown of
Test Pumping Rate: <u>105</u> Gallons Per Minute	<u>19</u> feet after <u>4</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>4</u> hours	

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

John W. Thompson 0-0679
Print Name of Pump Installer and License No. (if applicable)

John W. Thompson
Signature of Pump Installer

JAN 10 2005
BY: OLWR