

Well #2

County: Perry  
 Permit #: \_\_\_\_\_  
 Driller: David L. Cain  
 Date drilling completed: 5/17/2018

### 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: \_\_\_\_\_  
 Well #: C90  
 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.

<b>Information on Well Owner</b> (Landowner if borehole is not for a water well) Owner Name: <u>Steve Goodnight</u> Mailing Address: <u>91836 Hwy 42</u> <u>Righton Ms 39476</u> City State Zip Code Telephone No. <u>(601) 408 6677</u>		<b>Well or Borehole Location</b> Latitude: <u>31° 23' 10"</u> Longitude: <u>88° 51' 50"</u> Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS <u>N <sup>SW</sup> <sup>NE</sup> E <sup>SE</sup> W</u> Sec <u>23</u> Twn <u>5N</u> Rng <u>9W</u> Distance Direction Nearest Town <u>4</u> Miles <u>East</u> of <u>Righton Ms</u>	
<b>Well / Borehole Data</b> Date drilling started: <u>5/14</u> Date drilling completed: <u>5/16</u> Hole depth: <u>340</u> Hole diameter: <u>4"</u> Location of the source of any surface water used for drilling: <u>East Perry County Comm. Well</u> Method of dosing and volume of Chlorine used in drilling and development: _____ Logs run (circle all applicable): <u>No log run</u> Electric Gamma Ray Density Sonic Neutron Other: _____ Name of organization running log(s): _____ Purpose of borehole (check one): Water Well <input checked="" type="checkbox"/> 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 (check one): Home _____ Industrial <input checked="" type="checkbox"/> Public Supply _____ Irrigation _____ Fish Culture _____ Other: <u>Chicken Farm</u> If a flowing well, method of flow regulation: Valve _____ Other (describe) _____ Static Water Level: <u>92</u> feet above or below (circle one) land surface Date measured: <u>5/17/2018</u> Method of Measurement (circle one) steel tape electric tape air line other: <u>String</u> RECEIVED Well depth: <u>340</u> Well grouted to a depth of <u>20</u> feet Type of grout (circle one): Neat Cement <u>Bentonite</u> Mix JUL 06 2018 Casing length: <u>300</u> feet Casing diameter: <u>4</u> inches Type of casing: <u>PVC</u> Screen length: <u>40</u> feet Screen diameter: <u>2</u> inches Type of screen: <u>PVC</u> BY OLWR Screen slot size: <u>#10</u> inches Setting depth: From <u>300</u> feet to <u>340</u> feet Type of completion (circle all applicable): Gravel packed Underreamed <u>Telescoped</u> Open hole Natural Development Other (describe): _____ Top of lap pipe or reduction in casing: <u>280'</u> feet. If telescoped or more than one screen, describe on next page			

Southern Ms Water Well Drilling  
 Lic # 0-831

Form: OLWR-SWR-1A (04/08)  
Randall Cain  
5/31/2018

# 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  
 (601)961-5210  
 (601)961-5228 (fax)

County: Perry  
 Permit #: \_\_\_\_\_  
 Driller: David L. Cain  
 Date completed: 5/18/2018  
 Copy information from block on Part 1

**For Office Use Only:**

Aquifer: \_\_\_\_\_  
 Well #: 090  
 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 #2

Well Owner Information	Well Location
Owner Name: <u>Steve Goodnight</u>	Latitude: <u>31° 23' 10"</u> Longitude: <u>88° 51' 50"</u>
Mailing Address: <u>91836 Hwy 42</u>	Method of Lat/Long (check one): <input type="checkbox"/> Conventional Survey
<u>Richton MS 39476</u>	USGS quad _____ Hand-held GPS <input checked="" type="checkbox"/> Survey-grade GPS _____
City State Zip Code	<u>N 1/4 E 1/4 Sec 23 T.5N R.9W</u>
Telephone No. <u>(601) 408 6677</u>	Distance Direction Nearest Town <u>1/4 Miles East of Richton MS</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet <input checked="" type="radio"/> Submersible	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston Turbine	<input checked="" type="radio"/> Electric Motor Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>5 hp</u>
Date Pump Installed: <u>5/17/2018</u>	Setting Depth: <u>180</u> feet
Rated Pump Capacity: <u>50</u> Gallons Per Minute	Number of Stages: <u>15</u>

RECEIVED

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>5/17/2018</u>	Air Line Electric Measuring Line <input checked="" type="radio"/> Steel Tape
Static Water Level (A): <u>92</u> Feet Below Land Surface	Other (specify): <u>String</u>
Pumping Water Level (B): <u>125</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>33</u> Feet Below Land Surface	Well yielded <u>90</u> GPM with a drawdown of
Test Pumping Rate: <u>90</u> Gallons Per Minute	<u>33</u> feet after <u>4</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>4</u> hours	

MAY 06 2018

BY OLWR

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

Southern MS Water Well      David L. Cain  
 Print Name of Pump Installer and License No. (if applicable)      Signature of Pump Installer

LC # D-831

5/31/2018

1948

1948

1. The first part of the report deals with the general situation in the country. It is noted that the economy is still in a state of depression and that the government is struggling to meet its obligations. The report also mentions the need for a more active role for the private sector in the economy.

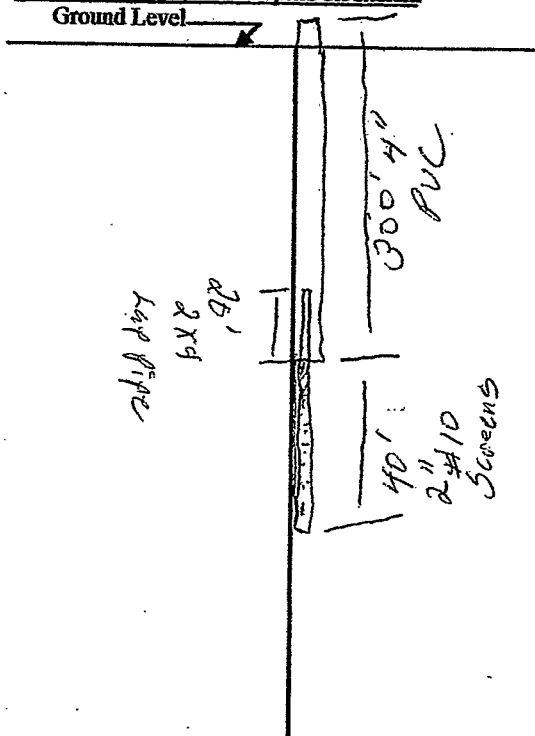
2. The second part of the report discusses the progress made in the various sectors of the economy. It is noted that there has been a slight improvement in the agricultural sector, but that the industrial sector remains stagnant. The report also mentions the need for more investment in infrastructure and social services.

3. The third part of the report deals with the social and cultural aspects of the country. It is noted that there is a growing awareness of social justice and that the government is taking steps to improve the living conditions of the poor. The report also mentions the need for more education and training opportunities for the young people of the country.

4. The fourth part of the report discusses the international situation and the country's role in the world. It is noted that the country is still a member of the United Nations and that it is working to improve its relations with other countries. The report also mentions the need for more international cooperation and assistance.

The sketch below only required for water wells

If well telescopes, show depths on sketch.



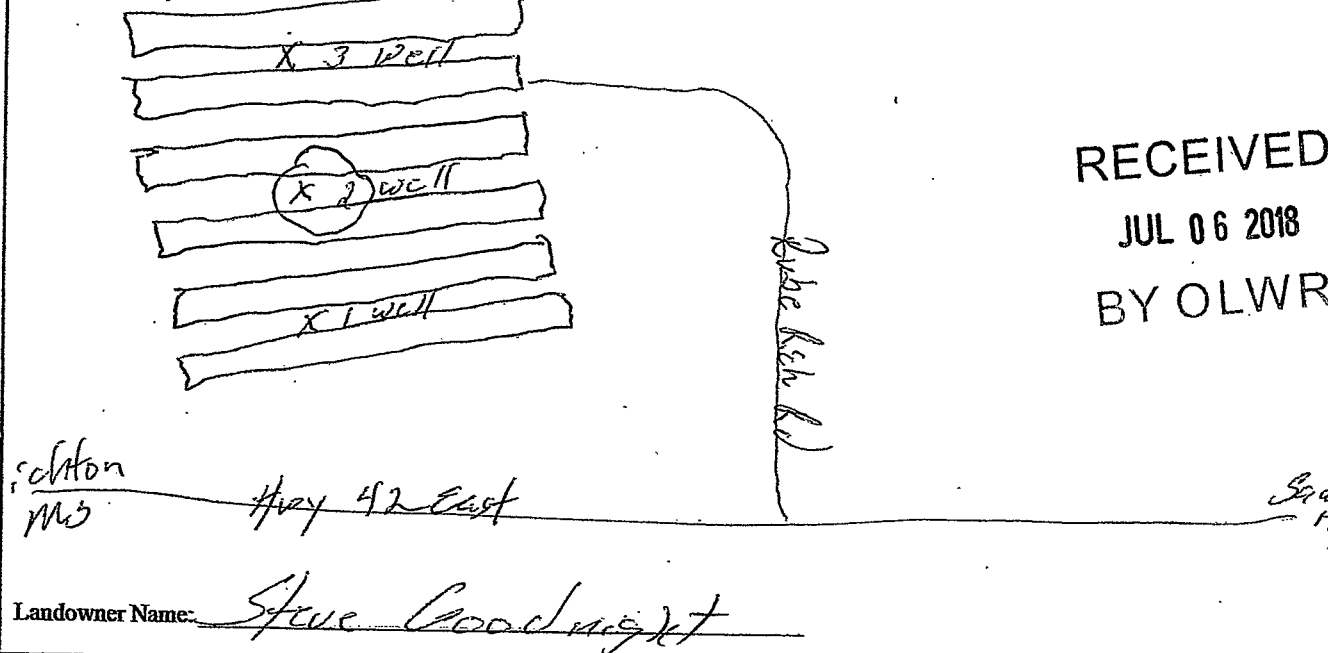
Well #2

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)
Top soil & Clay	Ground Level	15
Sand	15	25
Clay	25	200
Sand & Clay Mix	200	280
Water Sand	280	340

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.



RECEIVED  
JUL 06 2018  
BY OLWR

Richardson MS Hwy 42 East Brad Hill MS

Landowner Name: Steve Goodnight

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

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.

Southern MS Water Well 5/31/2018 Brad Hill  
Print Name of Responsible Licensee and License No. #0-831 Date Signature of Licensee