

State Well Report

Part I

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: Pike
 Permit #: _____
 Driller: Travis Boone
 Date drilling completed: 11-15-05

For Office Use Only:
 Aquifer: _____
 Well #: L-150
 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>Van Norman</u> | Latitude: _____ Longitude: _____ | | Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS | | |
| Mailing Address: <u>7128 Pike 93 South</u> | City: _____ State: _____ Zip Code: <u>39652</u> | | _____ 1/4 _____ 1/4 Sec <u>3</u> Twp <u>1N</u> Rng <u>8E</u> | | |
| Telephone No. (____) _____ | Distance _____ Miles | | Direction <u>SE</u> of Nearest Town <u>Magnolia</u> | | |

Well Data

Purpose of Well (circle one): Home Industrial Public Supply Irrigation Fish Culture Other: _____

Date well drilling started: 11-15-05 Date well drilling completed: 11-15-05

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

Static Water Level: 90 feet above or below (circle one) land surface Date measured: 11-15-05

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

Hole depth: _____ Well depth: 140 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite 4 Mix

Casing length: 120 feet Casing diameter: 4 inches Type of casing: 4" 40

Screen length: 20 feet Screen diameter: 4 inches Type of screen: 4" 40

Screen slot size: 8 inches Setting depth: From 120 feet to 140 feet

Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development
 Other (describe): _____

Top of lay 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.

TRAVIS BOONE 0-514
 Print Name of Water Well Contractor and License No.

Travis Boone
 Signature of Water Well Contractor

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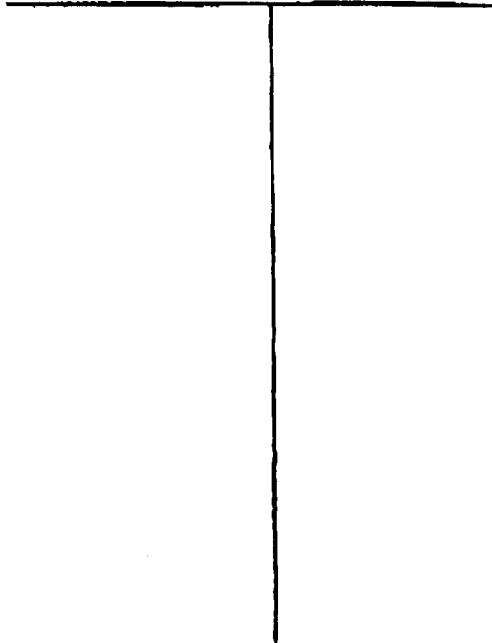
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L-150

If well telescopes please sketch below and show depths.

Ground Level



| Description of Formations Encountered | From | To |
|---------------------------------------|------|-----|
| CLAY | 0 | 15 |
| SAND & GRAVEL | 15 | 140 |
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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) indicate direction.

Landowner Name: Van Nouran

Mavis Beard
Signature of Water Well Contractor

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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)961-9210
(601)354-6938 (fax)

County: Pike
 Permit #: _____
 Driller: Travis Boone
 Date completed: 11-15-05

For Office Use Only:

Aquifer: _____
 Well #: L-150
 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>Van Dorman</u> | Latitude: _____ Longitude: _____ |
| Mailing Address: <u>7128 Pike 93 South</u> <u>Magnolia</u> <u>39652</u> | Method of Lat/Long (circle one): <input type="radio"/> Conventional Survey, <input type="radio"/> USGS quad, <input type="radio"/> Hand-held GPS, <input type="radio"/> Survey-grade GPS |
| City: _____ State: _____ Zip Code: _____ | <u>1/4</u> <u>1/4</u> Sec. <u>3</u> Twn <u>1N</u> Rng <u>8E</u> |
| Telephone No. (_____) _____ | Distance _____ Direction _____ Nearest Town _____ <u>5</u> Miles <u>SE</u> of <u>Magnolia</u> |

| Pump Type Circle one | Power Type Circle one |
|--|---|
| Air Lift <input type="radio"/> Jet <input type="radio"/> <input checked="" type="radio"/> <u>Submersible</u> | Diesel Engine <input type="radio"/> Gasoline Engine <input type="radio"/> Natural Gas <input type="radio"/> |
| Bucket <input type="radio"/> Piston <input type="radio"/> Turbine <input type="radio"/> | <input checked="" type="radio"/> <u>Electric Motor</u> <input type="radio"/> Hand <input type="radio"/> Tractor PTO |
| Centrifugal <input type="radio"/> Rotary <input type="radio"/> Flowing Well <input type="radio"/> | Windmill <input type="radio"/> Other (specify): _____ |
| Other (specify): _____ | Horse Power Rating of Motor: <u>1</u> |
| Date Pump Installed: <u>11-15-05</u> | Setting Depth: <u>125</u> feet |
| Rated Pump Capacity: <u>12</u> Gallons Per Minute | Number of Stages: _____ |

| Pump Test Data | Method of Measuring Water Level Circle one |
|---|---|
| Date Well Tested: <u>11-15-05</u> | Air Line <input type="radio"/> Electric Measuring Line <input type="radio"/> Steel Tape <input type="radio"/> |
| Static Water Level (A): <u>90</u> Feet Below Land Surface | Other (specify): <u>string line</u> |
| Pumping Water Level (B): _____ Feet Below Land Surface | For flowing well, measured shut in head: _____ feet |
| Drawdown (B) - (A): _____ Feet Below Land Surface | Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping |
| Test Pumping Rate: <u>16.0F</u> Gallons Per Minute | |
| Duration of Pump Test (minimum 4 hours): _____ hours | |

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

TRAVIS BOONE 0-514 Travis Boone
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

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