

County: Pike  
 Permit #: \_\_\_\_\_  
 Drilled: Fitzgerald Water Well  
 Date drilling completed: 10/23/17

**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 #: L-253  
 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.*

**Information on Well Owner**  
*(Landowner if borehole is not for a water well)*

Owner Name: David Summiano  
 Mailing Address: Emerald State Line Rd  
Progress Ms  
 City State Zip Code  
 Telephone No. ( ) \_\_\_\_\_

**Well or Borehole Location**

Latitude: 31° 02' 31.3" N Longitude: 90° 21' 57.2" W  
 Method of Lat/Long (circle one): Conventional Survey,  
 USGS quad, Hand-held GPS, Survey-grade GPS  
NW 1/4 NE 1/4 Sec 23 Twn 1 N Rng 8 E  
 Distance Direction Nearest Town  
 \_\_\_\_\_ Miles \_\_\_\_\_ of \_\_\_\_\_

**Well / Borehole Data**

Date drilling started: 10/23/17 Date drilling completed: 10/23/17 Hole depth: 90' Hole diameter: 8"  
 Location of the source of any surface water used for drilling: \_\_\_\_\_  
 Method of dosing and volume of Chlorine used in drilling and development: \_\_\_\_\_  
 Logs run (circle all applicable): (No log run) Electric Gamma Ray Density Sonic Neutron Other: \_\_\_\_\_  
 Name of organization running log(s): \_\_\_\_\_  
 Purpose of borehole (check 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 (check one): Home  Industrial \_\_\_\_\_ Public Supply \_\_\_\_\_ Irrigation \_\_\_\_\_ Fish Culture \_\_\_\_\_ Other: \_\_\_\_\_  
 If a flowing well, method of flow regulation: Valve \_\_\_\_\_ Other (describe) \_\_\_\_\_  
 Static Water Level: 55' feet above or below (circle one) land surface Date measured: 10-23-17  
 Method of Measurement (circle one) steel tape electric tape air line other: \_\_\_\_\_  
 Well depth: 90' Well grouted to a depth of 10' feet Type of grout (circle one) Neat Cement Bentonite Mix  
 Casing length: 80' feet Casing diameter: 4" inches Type of casing: Pvc  
 Screen length: 10' feet Screen diameter: 4" inches Type of screen: Pvc  
 Screen slot size: .010 inches Setting depth: From 80' feet to 90' 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 next page*

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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 2309  
 Jackson, MS 39225  
 (601)961-5210  
 (601)961-5228 (fax)

County: Pike  
 Permit #: \_\_\_\_\_  
 Driller: Fitzgerald Water Well  
 Date completed: 10/23/17  
*Copy information from block on Part 1*

**For Office Use Only:**

Aquifer: \_\_\_\_\_  
 Well #: L253  
 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 Owner Information	Well Location
Owner Name: <u>David Summomo</u>	Latitude: <u>31° 02' 31.3" N</u> Longitude: <u>90° 21' 57.2" W</u>
Mailing Address: <u>Emerald State Line Rd.</u>	Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
<u>Progers, MS</u> City State Zip Code	<u>NW ¼ NE ¼ Sec 23 T1N R8E</u>
Telephone No. ( ) _____	Distance _____ Direction _____ Nearest Town _____ _____ Miles _____ of _____

Pump Type Circle one	Power Type Circle one
Air Lift            Jet <u>Submersible</u>	Diesel Engine      Gasoline Engine      Natural Gas
Bucket            Piston            Turbine	<u>Electric Motor</u> Hand            Tractor PTO
Centrifugal      Rotary            Flowing Well	Windmill            Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>1/2</u>
Date Pump Installed: <u>10-23-17</u>	Setting Depth: <u>80</u> feet
Rated Pump Capacity: <u>12</u> Gallons Per Minute	Number of Stages: <u>8</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: _____	Air Line            Electric Measuring Line <u>Steel Tape</u>
Static Water Level (A): _____ Feet Below Land Surface	Other (specify): _____
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: _____ 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.

David Fitzgerald      Red Stull  
 Print Name of Pump Installer and License No. (if applicable)      Signature of Pump Installer

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

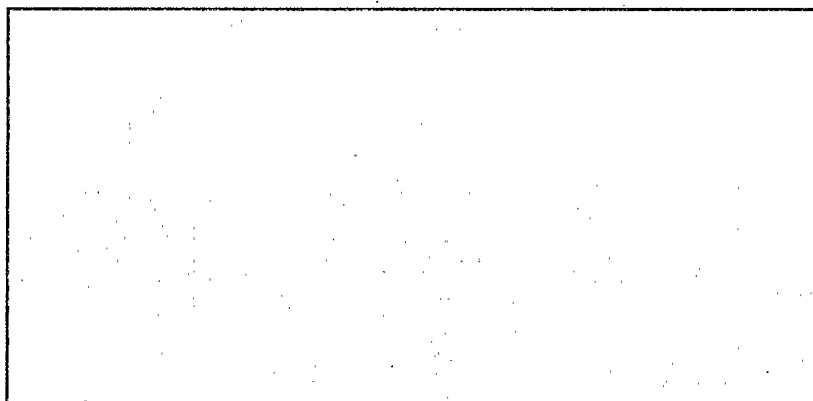
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L253

Google Maps 31°02'31.3"N 90°21'57.2"W



Imagery ©2017 Google, Map data ©2017 Google 200 ft



31°02'31.3"N 90°21'57.2"W

31.042024, -90.365894

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David Simmons - 90' - 55' - 80' 1/2 10-23-17