

AD # 058 0010-03

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)

For Office Use Only:

Well #: M 32
Aquifer: _____
E-Log #: _____

County: Pontotoc 115
Permit #: MS-GW-17034
Driller: Donald Smith Co.
Date drilling completed: 12/31/13

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.

Well Owner Information (Landowner if borehole is not for a water well)		Well or Borehole Location <u>42.78</u>	
Owner Name: <u>Troy Water Assoc</u>		Latitude: <u>34° 08' 22" N</u> Longitude: <u>88° 54' 43" W</u>	
Mailing Address: <u>175 Rockhill Rd</u>		Method of Lat/Long (check one): Conventional Survey _____	
City: <u>Pontotoc</u> State: <u>MS</u> Zip Code: <u>388</u>		USGS quad _____, Hand-held GPS <u>X</u> , Survey-grade GPS _____	
Telephone No. () _____		<u>SW 1/4 SW 1/4, Sec 08 T. 11S R 04E</u>	
		<u>10</u> Miles <u>S</u> of <u>Pontotoc</u> (Distance) (Direction) (Nearest Town)	

for from
aerial
photo

Well / Borehole Data

Date drilling started: 9/18/13 Date drilling completed: 12/31/13 Hole depth: 1225 Hole diameter: 9 7/8"

Location of the source of any surface water used for drilling: Public Water Supply

Method of dosing and volume of Chlorine used in drilling and development: Potable water Used

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

Name of organization running log(s): Donald Smith Co., Inc

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: 380.8 feet [above or below land surface Date measured: 11/25/13
(circle one)]

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

Well depth: 1025 Well grouted to a depth of: 930 feet Type of grout (circle one) Neat Cement Bentonite Mix

Casing length: 930 feet Casing diameter: 12 inches Type of casing: Carbon Steel

Screen length: 75 feet Screen diameter: 8 inches Type of screen: Stainless Steel

Screen slot size: .025 inches Setting depth: From 975 feet to 960 feet
Blank 960'-975' = 15' 55 8"
Open hole Natural Development

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

Other (describe): _____

Top of lap pipe or reduction in casing: 845 feet

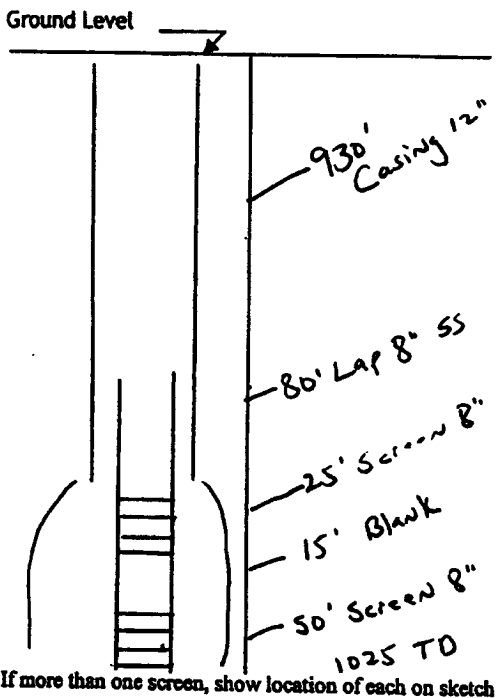
If telescoped or more than one screen, describe on next page

County: Pontotoc
 Permit #: GW 17034

For Office Use Only:
 Well #: 1132

The sketch below only required for water wells
If well telescopes, show depths on sketch.

Description of formations encountered must be provided for all wells
and boreholes, unless specifically exempted by regulations

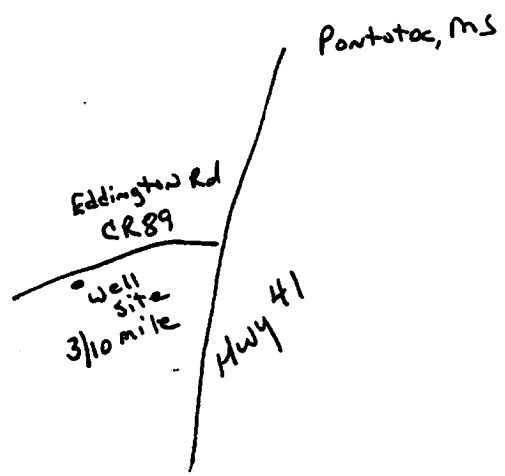


Description of Formations Encountered	From (depth)	To (depth)
	Ground level	
Clay Sandy	0	5'
Clay Red	5'	9'
Clay Sandy	9'	15'
Sand Tough Streaks	15'	22'
Chalk Tough	22'	25'
Sand Clay Streaks	25'	30'
Clay/Sand Tough	30'	40'
Sand	40'	44'
Rock Choppy Clay	44'	52'
Rock Hard	52'	54'
Clay Hard Rock Sand Streaks	54'	59'
Sand	59'	70'
Blue Clay	70'	86'
Clay Rock & Sand Streaks	86'	89'
Clay Choppy Streaks	89'	120'
Rock choppy Clay Streaks	120'	172'

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) north arrow



Landowner Name: _____

I HEREBY 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.

Robert L. Young, Jr. UNR-5671 3/5/14
 Print Name of Responsible Licensee and License No. Date

Robert L. Young, Jr.
 Signature of Licensee

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: Pontotoc
 Permit #: MS-GW-17034
 Driller: Donald Smith Co.
 Date completed: 04/15/14
Copy information from block on Part 1

For Office Use Only:

Well #: M-32
 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>Troy Water Assoc</u>	Latitude: <u>3408</u> ^{11.26} 08 33 W Longitude: <u>8854</u> 43 93 W ^{42.78}
Mailing Address: <u>175 Rockhill Rd</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
<u>Pontotoc</u> <u>ms</u> <u>38863</u>	<u>SW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$, Sec <u>08</u> T <u>11S</u> R <u>04E</u>
City State Zip Code	<u>10</u> Miles <u>S</u> of <u>Pontotoc</u>
Telephone No. (____) _____	(Distance) (Direction) (Nearest Town)

Pump Type (circle one)

Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe): _____

Date Pump Installed: 02/05/14 Rated Pump Capacity: 475 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: 100 Setting Depth: 525 feet Number of Stages: 11

Pump Test Data for Non Flowing Well

Date Well Tested: 03/21/14 Duration of Pump Test (minimum 4 hours): 4 hours

Static Water Level (A): 376 Feet Below Land Surface Pumping Water Level (B): 460 Feet Below Land Surface

Drawdown [(B) - (A)]: 84 Feet Below Land Surface Test Pumping Rate: 473 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 _____ GPM with a drawdown of _____ feet after _____ hours of pumping

Meter Installation

Meter Manufacturer: McCrometer Meter Serial Number: 20132664

Meter Model Number/Name: M604-06 Type of Meter: mainline

Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): _____

Installation Date: 02/02/14 Meter installed by: Donald Smith Company

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.

Received
 MAY 13 2014
 BY OLWR

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

Robert L. Young Jr. UNR-5671 5/08/14 Robert L. Young Jr.

Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer