

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: C64
Well #: B-24 119
L. S. Elevation: _____
E-log #: _____

County: Quitman 119
Permit #: MS-GW-16034
Driller: Lynwood Hathcock
Date drilling completed: 09/08/04

Layne Central Company

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>Darling Water Association</u>	Latitude: <u>34 ° 21 ' 33N</u> Longitude: <u>90 ° 16 ' 25 W</u>
Mailing Address: <u>P O Box 83</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS
<u>Darling</u> MS <u>38623</u> City State Zip Code	<u>SW</u> ¼ <u>NE</u> ¼ Sec <u>27 29</u> Twn <u>29N</u> 8S Rng <u>10W</u> ✓
Telephone No. <u>(662) 326-4274</u>	Distance <u>1</u> Miles Direction <u>West</u> of Nearest Town <u>Darling, MS</u> <u>1 Mile West of Highway 3</u>
Well Data	
Purpose of Well (circle one) Home Industrial <u>Public Supply</u> Irrigation Fish Culture Other: _____	
Date well drilling started: <u>07/12/04</u> Date well drilling completed: <u>09/08/04</u>	
If flowing, method of flow regulation: Valve <u>N/A</u> Other (describe) _____	
Static Water Level: <u>33</u> feet above or <u>below</u> (circle one) land surface Date measured: <u>09/08/04</u>	
Method of Measurement (circle one) steel tape <u>electric tape</u> air line other: _____	
Hole depth: <u>1586</u> Well depth: <u>1498</u> Well grouted to a depth of <u>1440</u> feet	
Type of grout (circle one): Cement <u>Bentonite</u> Mix	
Casing length: <u>1440</u> feet Casing diameter: <u>10</u> inches Type of casing: <u>Black Steel</u>	
Screen length: <u>40</u> feet Screen diameter: <u>6</u> inches Type of screen: <u>304 SS Rod Base</u>	
Screen slot size: <u>.017</u> inches Setting depth: From <u>1445</u> feet to <u>1485</u> feet	
Type of completion (circle all applicable): <u>Gravel packed</u> <u>Underreamed</u> Telescoped Open hole Natural Development Other (describe): _____	
Top of lap pipe or reduction in casing: <u>1380</u> feet. If telescoped or more than one screen, describe on back of page	
Logs run (circle all applicable): No log run <u>Electric</u> <u>Gamma Ray</u> Density Sonic Neutron Other: _____	
Name of organization running log(s): <u>LAYNE</u>	
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.	
<u>Layne Central 0-064</u>	<u>Dave Cook</u>
Print Name of Water Well Contractor and License No.	Signature of Water Well Contractor
	Dave Cook, General Manager

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If well telescopes please sketch below and show depths.

Ground Level

~~B-24~~

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Description of Formations Encountered	From	To
Clay	0	15
Sand	15	36
Clay	36	41
Sand, Clay Streaks, & Gravel	41	112
Clay	112	116
Fine Sand & Clay Streaks	116	208
Clay	208	218
Sandy Clay & Sand Streaks	218	267
Sand & Clay Streaks	267	287
Clay	287	399
Rock	399	402
Clay	402	406
Rock	406	407
Clay	407	435
Sandy Clay	435	475
Hard Shale	475	560
Sandy Shale	560	602
Sandy Shale & Sand Streaks	602	652
Fine Sand & Shale Streaks	652	703
Hard Shale	703	714
Fine Sand & Shale	714	777
Sandy Shale	777	806
Hard Shale	806	873
Fine Sand and Shale Streaks	873	900

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.

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Landowner Name: _____



Signature of Water Well Contractor
 Dave Cook, General Manager

If well telescopes please sketch below and show depths.

Ground Level

B-24

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Description of Formations Encountered	From	To
Hard Shale	900	904
Sandy Shale	904	912
Hard Shale & Rock Streaks	912	1060
Sand & Shale Streaks	1060	1098
Rock	1098	1099
Hard Shale	1099	1180
Sand & Shale Streaks	1180	1184
Sandy Shale	1184	1235
Rock	1235	1237
Hard Shale	1237	1252
Sandy Shale & Sand Streaks	1252	1257
Hard Shale	1257	1278
Sandy Shale & Sand Streaks	1278	1316
Hard Shale & Lignite	1316	1412
Hard Sandy Shale	1412	1432
Fine Sand & Shale Streaks	1432	1508
Hard Shale	1508	1545
Hard Shale & Clay	1545	1585
Rock	1585	1586

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.

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Landowner Name: _____

Dave Cook

Signature of Water Well Contractor
Dave Cook, General Manager

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 #: B-24-C-64
Elevation: _____

County: Quitman
Permit #: _____
Driller: Lynwood Hathcock
Date completed: 09/08/04

This report must be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump. A copy of Part 1 of this report must be attached to this report.

Well Owner Information	Well Location
Owner Name: <u>Darling Water Association</u>	Latitude: <u>34° 21' 33" N</u> Longitude: <u>90° 16' 25" W</u>
Mailing Address: <u>PO Box 83</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>Hand-held GPS</u> Survey-grade GPS
<u>Darling MS 38623</u> City State Zip Code	<u>1/4</u> <u>1/4</u> Sec <u>27</u> Twn <u>29 N</u> Rng <u>10 W</u> <u>29</u> <u>8 S</u>
Telephone No. (<u>662</u>) <u>326-4274</u>	Distance Direction Nearest Town <u>1</u> Miles <u>West</u> of <u>Highway 3</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston <u>Turbine</u>	<u>Electric Motor</u> Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>20</u>
Date Pump Installed: <u>11/30/04</u>	Setting Depth: <u>130</u> feet
Rated Pump Capacity: <u>200</u> Gallons Per Minute	Number of Stages: <u>8</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>Not tested yet w/ perm. pump</u>	Air Line <u>Electric Measuring Line</u> Steel Tape
Static Water Level (A): <u>34</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>95</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>61</u> Feet Below Land Surface	Well yielded <u>319</u> GPM with a drawdown of
Test Pumping Rate: <u>319</u> Gallons Per Minute	<u>61</u> feet after <u>4</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>4</u> hours	

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

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

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