

County: Quitman  
 Permit #: 0368  
 Driller: Joel Jumper  
 Date drilling completed: 6/23/06

**State Well Report**  
**Part 1 - Driller's Log**  
 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 #: D-20  
 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.*

<p><b>Information on Well Owner</b>          (Landowner if borehole is not for a water well)</p> <p>Owner Name: <u>Ellington Massey</u>          Mailing Address: <u>P.O. Box 247</u>  <u>Lyon MS 38645</u>          City State Zip Code          Telephone No. <u>(662) 624-5357</u></p>	<p><b>Well or Borehole Location</b></p> <p>Latitude: <u>34° 17' 36"</u> Longitude: <u>90° 23' 46"</u>          Method of Lat/Long (circle one): Conventional Survey, <u>4:2</u>          USGS quad, <u>Hand-held GPS</u>, Survey-grade GPS <u>2W</u>  <u>SE 1/4 SW 1/4</u> Sec. <u>15</u> Twp. <u>28N</u> Rng. <u>14W</u></p> <p>Distance Direction Nearest Town  <u>5</u> Miles <u>East</u> of <u>Jonestown</u></p>
<p><b>Well / Borehole Data</b></p> <p>Date drilling started: <u>6/23/06</u> Date drilling completed: <u>6/23/06</u> Hole depth: <u>120</u> Hole diameter: <u>16</u></p> <p>Location of the source of any surface water used for drilling: <u>supply well</u>          Method of dosing and volume of Chlorine used in drilling and development: _____</p> <p>Logs run (circle all applicable): <u>No log run</u> Electric Gamma Ray Density Sonic Neutron Other: _____          Name of organization running log(s): _____</p> <p>Purpose of borehole (check one): Water Well <input checked="" type="checkbox"/> Geotechnical/Geological Investigation _____ Ground Source Heat Pump _____          Seismic Survey _____ Other (describe) _____</p> <p><i>If drilling is not related to water well construction, skip the remainder of this block</i></p> <p>Purpose of Well (check one): Home _____ Industrial _____ Public Supply _____ Irrigation <input checked="" type="checkbox"/> Fish Culture _____ Other: _____</p> <p>If a flowing well, method of flow regulation: Valve _____ Other (describe) _____</p> <p>Static Water Level: <u>20</u> feet above or below (circle one) land surface Date measured: _____</p> <p>Method of Measurement (circle one) <u>steel tape</u> electric tape air line other: _____</p> <p>Well depth: <u>120</u> Well grouted to a depth of <u>120</u> feet Type of grout (circle one): Neat Cement Bentonite Mix          Casing length: <u>80</u> feet Casing diameter: <u>10</u> inches Type of casing: <u>PVC</u>          Screen length: <u>40</u> feet Screen diameter: <u>10</u> inches Type of screen: <u>PVC</u>          Screen slot size: <u>50</u> inches Setting depth: From <u>80</u> feet to <u>120</u> feet</p> <p>Type of completion (circle all applicable): <u>Gravel packed</u> Underreamed Telescoped Open hole Natural Development          Other (describe): _____</p> <p>Top of lap pipe or reduction in casing: _____ feet. <i>If telescoped or more than one screen, describe on next page</i></p>	

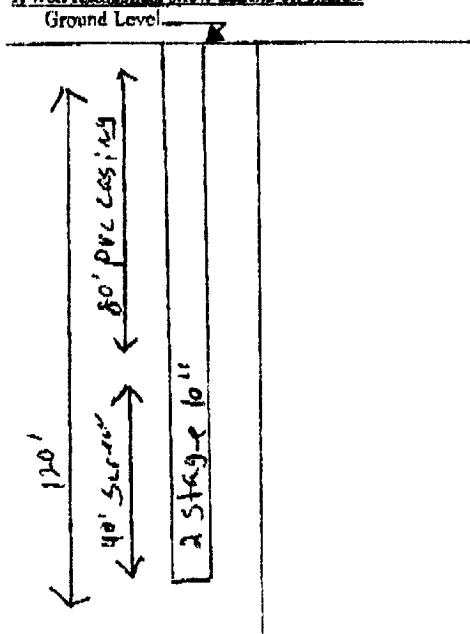
Form: OLWR-SWR-1A

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D-20

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) Ground Level	To (depth)
Clay	0	20
Fine sand	20	45
Coarse sand	45	120

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.

A hand-drawn sketch of a property layout. It shows a winding line representing a road or boundary, labeled "Highway 316" and "MARKS". To the left is "Jones town" and to the right is "E". A north arrow is shown at the top. A specific spot is marked as the "well location", with roads labeled "Highway", "Rosa", and "COW Road" nearby.

Landowner Name: Ellington Massy S

Form: OLWR-SWR-1A

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 law.

Print Name of Responsible Licensee and License No. Joel Jumper 0368 Date 7-11-06

Signature of licensee [Signature]

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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)961-5210  
 (601)354-6938 (fax)

County: Quitman  
 Permit #: 0368  
 Driller: Joel Jumper  
 Date completed: 6/23/06  
*Copy information from block on Part 1*

**For Office Use Only:**

Aquifer: \_\_\_\_\_  
 Well #: D-20  
 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>Ellington Massey</u>	Latitude: <u>34 17 60</u> Longitude: <u>090 23 69</u>
Mailing Address: <u>P.O. Box 247</u>	Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> Survey-grade GPS _____
<u>Lyon MS 38645</u>	_____ 1/4 _____ 1/4 Sec <u>15</u> T. <u>28N</u> R. <u>11W</u>
City State Zip Code	Distance Direction Nearest Town
Telephone No. ( <u>662</u> ) <u>624-5357</u>	<u>5</u> Miles <u>East</u> of <u>Jonestown</u>

Pump Type Circle one	Power Type Circle one
Air Lift      Jet      Submersible	<u>Diesel Engine</u> Gasoline Engine      Natural Gas
Bucket      Piston <u>Turbine</u>	Electric Motor      Hand      Tractor PTO
<del>Centrifugal</del> Rotary      Flowing Well	Windmill      Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: _____
Date Pump Installed: <u>6/23/06</u>	Setting Depth: <u>50</u> feet
Rated Pump Capacity: <u>1600</u> Gallons Per Minute	Number of Stages: <u>2</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>6/23/06</u>	Air Line      Electric Measuring Line <u>Steel Tape</u>
Static Water Level (A): <u>20</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>35</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>15</u> Feet Below Land Surface	Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping
Test Pumping Rate: <u>1600</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.

Joel Jumper 0368      Joel Jumper  
 Print Name of Pump Installer and License No. (if applicable)      Signature of Pump Installer

Form: **RECEIVED**  
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 BY: OLWR