

Quitman, Co.

Permit #: GW 4324P

Driller: Delta Drilling of Tenn

Date drilling completed: 5-21-09

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)

Aquifer: \_\_\_\_\_

Well #: J86

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>Ray Crawford</u>		Latitude: <u>34° 12' 30"</u>	Longitude: <u>90° 13' 28"</u>	
Mailing Address:	<u>225 Crawford Rd.</u>		Method of Lat/Long (circle one): <u>Hand-held GPS</u>		
	<u>Lambert</u>	<u>MS.</u>	<u>38673</u>	USGS quad <u>SE 1/4 SW 1/4 Sec 18</u> Twn <u>27N</u> Rng <u>11W</u>	
	City	State	Zip Code		
Telephone No.	<u>(662) 444-0723</u>		Distance	Direction	Nearest Town
			<u>2</u> Miles	<u>East</u>	of <u>Lambert, MS.</u>

**Well Data**

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

Date well drilling started: 5-21-09 Date well drilling completed: 5-21-09

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

Static Water Level: 4 feet above or below (circle one) land surface Date measured: 5-21-09

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

Hole depth: 100' Well depth: 100' Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 60 feet Casing diameter: 16 inches Type of casing: PVC

Screen length: 40 feet Screen diameter: 16 inches Type of screen: PVC

Screen slot size: .032 inches Setting depth: From 60 feet to 100 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 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.

Print Name of Water Well Contractor and License No.

Signature of Water Well Contractor

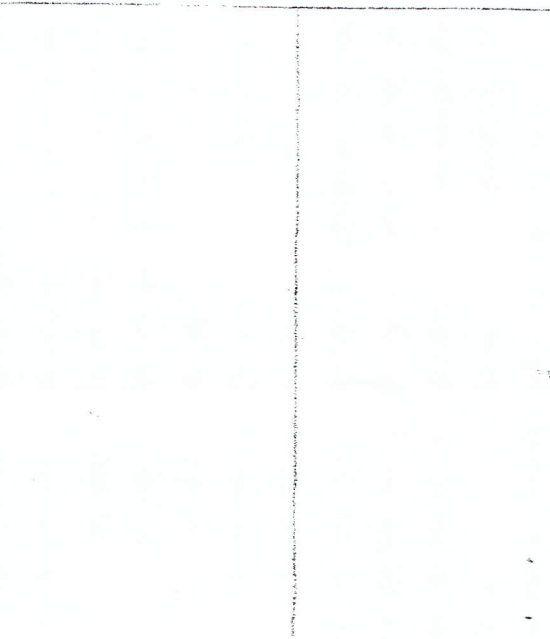
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BY: OLWR

J86

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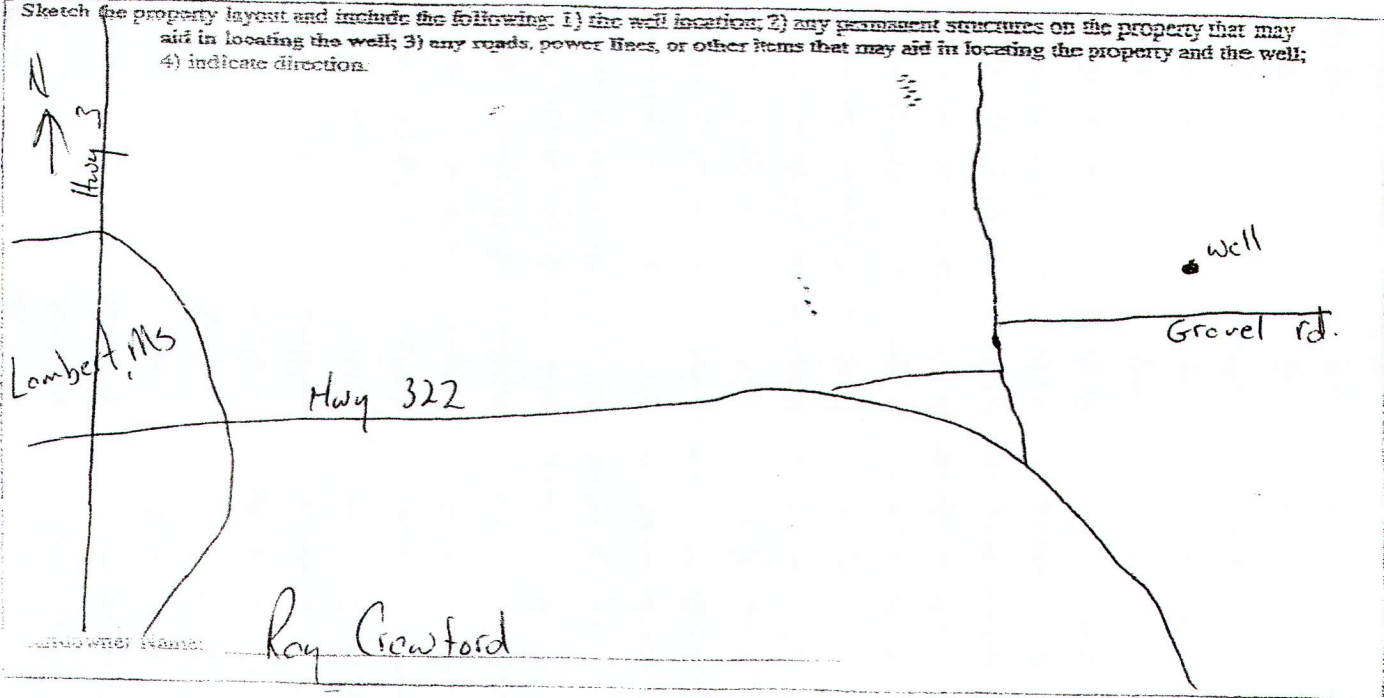
If well telescopes please sketch below and show details

Ground Level



DESCRIPTION OF PERMEATIONS ENCOUNTERED	From	To
Sandy loam soil	0	21
clay	21	29
clay and fine sand	30	39
Coarse sand and gravel	40	100

If more than one screen show location of each on sketch



Alvin Pytk  
Signature of Water Well Contractor

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**BY: OLWR**

# 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 39218-0631  
 (601)961-5216  
 (601)944-6938 (fax)

**For Office Use Only:**

Acquirer: \_\_\_\_\_  
 Well #: J86  
 Elevation: \_\_\_\_\_

County: Quitman, Co.  
 Permit #: GW43246  
 Driller: Delta Drilling of Tunica  
 Date completed: 5-21-09

This report should be prepared by the pump installer to date and filed with the Department within 30 days of the installation of pump.

Well Owner Information	Well Location
Owner Name: <u>Ray Crawford</u>	Latitude: <u>N34° 12.326'</u> Longitude: <u>W89° 13.250'</u>
Mailing Address: <u>225 Crawford Rd.</u>	Method of Location (circle one): <u>Conventional Survey</u>
<u>Lumbert</u> <u>Ms.</u> <u>39675</u>	USGS quad: <u>Hand-held GPS</u> Survey-grade GPS
City State Zip Code	SE <input checked="" type="checkbox"/> SW <input type="checkbox"/> Sec <u>18</u> Twn <u>27N</u> Rng <u>11W</u> <u>1E</u>
Telephone No. <u>(662) 444-0723</u>	Distance Direction Nearest Town <u>2</u> Miles <u>East</u> of <u>Lumbert, Ms.</u>

Pump Type Circle one	Power Type Circle one
Air Lift <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/>	<u>Diesel Engine</u> Gasoline Engine Natural Gas
Bucket <input type="checkbox"/> Piston <input type="checkbox"/> <u>Turbine</u>	Electric Motor <u>Hand</u> Tractor PTO
Centrifugal <input type="checkbox"/> Rotary <input type="checkbox"/> Flowing Well <input type="checkbox"/>	Windmill Other (specify): _____
Other (specify): _____	Motor Power Rating of Motor: <u>100 H.P.</u>
Date Pump Installed: <u>5-21-09</u>	Sealing Depth: <u>50</u> feet
Rated Pump Capacity: _____ Gallons Per Minute	Number of Stages: <u>1</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): _____ Foot Below Land Surface	Other (specify): _____
Pumping Water Level (B): _____ Foot Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown (C) - (A): _____ Foot 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.

Delta Drilling of Tunica, Inc. #0674  
 Print Name of Pump Installer and License No. (if applicable)

Alvin R. [Signature]  
 Signature of Pump Installer

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