

Job # 10-023

State Well Report

Part I -- 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)

County: Quitman
Permit #: G.W. 44026
Driller: Pete Sappington
Date drilling completed: Apr 24-10

For Office Use Only:
Aquifer: J87
Well #:
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: L.M. Green III
Mailing Address: 3230 Shinetanner Rd.
Lambert MS 38643
Telephone No. (662) 934-2659
Well or Borehole Location:
Latitude: 34° 09' 51.5" Longitude: 90° 12' 37.9"
Method of Lat/Long (circle one): Conventional Survey, 51, 38
USGS quad: Hand-held GPS, Survey-grade GPS
SW 1/4 Sec 32 Twn 21N Rng 12E
Distance 4 Miles Direction W of Nearest Town Crowder

Well / Borehole Data
Date drilling started: 4-24 Date drilling completed: 4-24 Hole depth: 94' Hole diameter: 28"
Location of the source of any surface water used for drilling: Nearby Bayou
Method of dosing and volume of Chlorine used in drilling and development: Sodium Hypo-Chlorite
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: 7 1/2 feet above or below (circle one) land surface Date measured: 4-25
Method of Measurement (circle one): steel tape electric tape air line other:
Well depth: 94' Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix
Casing length: 54 feet Casing diameter: 16" inches Type of casing: PVC Sch 40
Screen length: 40 feet Screen diameter: 16" inches Type of screen: Sch 40
Screen slot size: .032 inches Setting depth: From 54 feet to 94 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

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

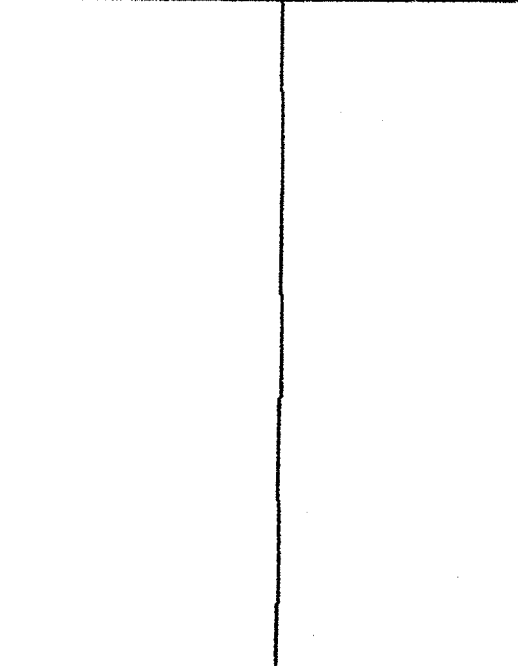
RECEIVED
DATE
BY: OMR

587

The sketch below only required for water wells

If well telescopes, show depths on sketch.

Ground Level →

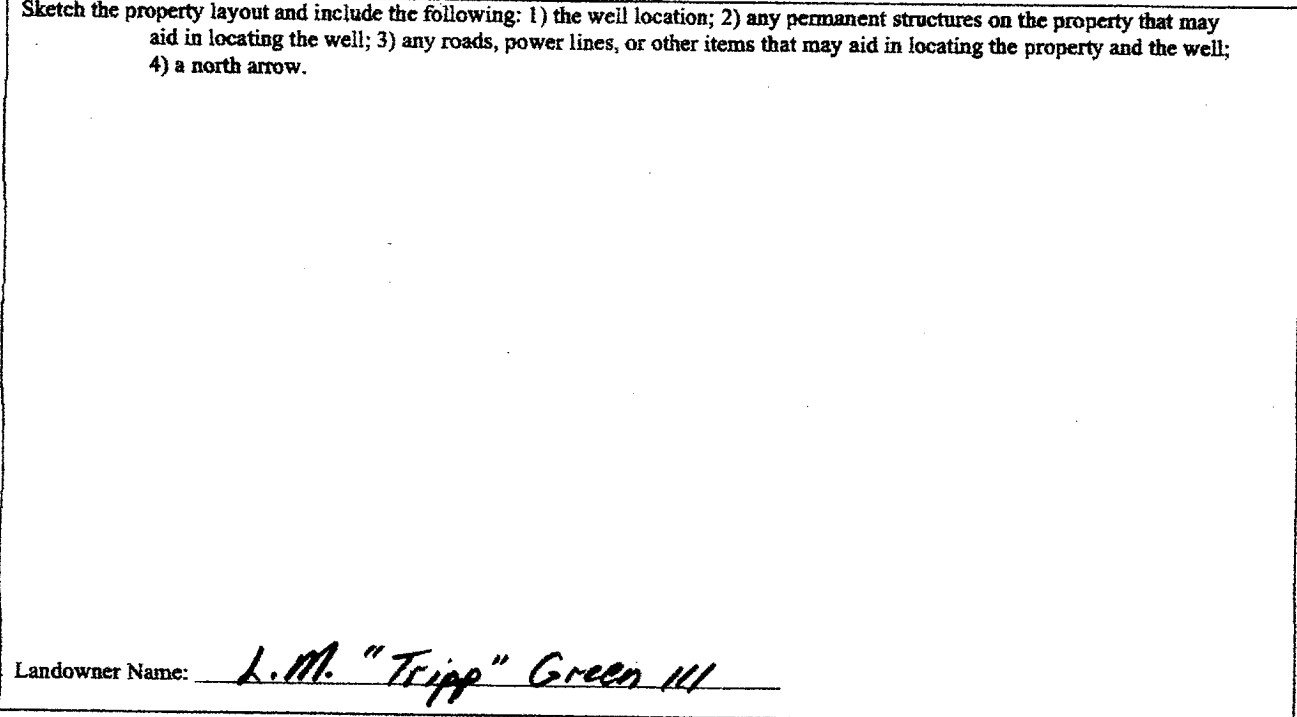


Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth) To (depth)	
	Ground Level	
Clay + Fine Sand	0	19'
Coarse Sand - gravel	19'	94'

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.



Landowner Name: L.M. "Tripp" Green III

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

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 laws.

Pete Suppington 0430 4-24

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee

RECEIVED
MAY 1 2010
OLWR

STATE WELL REPORT

J87

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)

For Office Use Only:

Aquifer: _____
 Well #: J87
 Elevation: _____

County: Quitman
 Permit #: GW-44026
 Driller: Pete's Well Drilling
 Date completed: 4-24-10
Copy information from block on Part 1

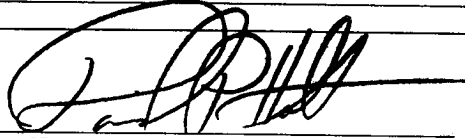
This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part 1 of the report must be attached and both parts filed with the Department at the above address within 30 days of well completion.

Well Owner Information	Well Location
Owner Name: <u>LM GREEN III</u>	Latitude: <u>34° 9' 50.3"</u> Longitude: <u>90° 12' 49"</u>
Mailing Address: <u>3230 Shireburn Rd</u>	Method of Lat/Long (check one): Conventional Survey <input checked="" type="checkbox"/> ³⁸
<u>Lambert, MS</u> <u>38643</u>	USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
City State Zip Code	_____ 1/4 _____ 1/4 Sec <u>32</u> T <u>27N</u> R <u>1E</u>
Telephone No. <u>662 934-2659</u>	Distance Direction Nearest Town <u>4</u> Miles <u>WSW</u> of <u>CROWDER</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston Turbine	Electric Motor Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>60</u>
Date Pump Installed: <u>5-4-10</u>	Setting Depth: <u>70</u> feet
Rated Pump Capacity: <u>2200</u> Gallons Per Minute	Number of Stages: <u>2</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): <u>7 1/2</u> 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 P. HOLT 0-752P 

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