

Log # G-0074

County: Rankin  
 Permit #: MS 2009-16520  
 Driller: Donald Smith Company  
 Date drilling completed: Jan. 14, 2010

**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 #: G0074  
 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 <i>(Landowner if borehole is not for a water well)</i>	Well or Borehole Location
Owner Name: <u>Langford Water Association</u>	Latitude: <u>32° 19' 54" W</u> Longitude: <u>89° 58' 35" W</u>
Mailing Address: <u>1805 Hwy 471</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad <u>(Hand-held GPS)</u> Survey-grade GPS
<u>Brandon, MS 39047</u> City State Zip Code	NW 1/4 Sec <u>27</u> Twn <u>6N</u> Rng <u>3E</u>
Telephone No. <u>(601) 591-1467</u>	Distance Direction Nearest Town <u>2</u> Miles <u>N</u> of <u>Brandon</u>

**Well / Borehole Data**

Date drilling started: 2-1-2009 Date drilling completed: 1-14-2010 Hole depth: 1312 Hole diameter: 17 1/2

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: N/A

Logs run (circle all applicable): No log run (Electric) Gamma Ray Density Sonic Neutron Other: \_\_\_\_\_  
 Name of organization running log(s): MDEQ

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) N/A

Static Water Level: 361 feet above or below (circle one) (land surface) Date measured: 9-15-2009

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

Well depth: 1312 Well grouted to a depth of 1235 feet Type of grout (circle one): (Neat Cement) Bentonite Mix

Casing length: 1235 feet Casing diameter: 12 inches Type of casing: Black steel .375 wall

Screen length: 70 feet Screen diameter: 8 inches Type of screen: Stainless wire wrap

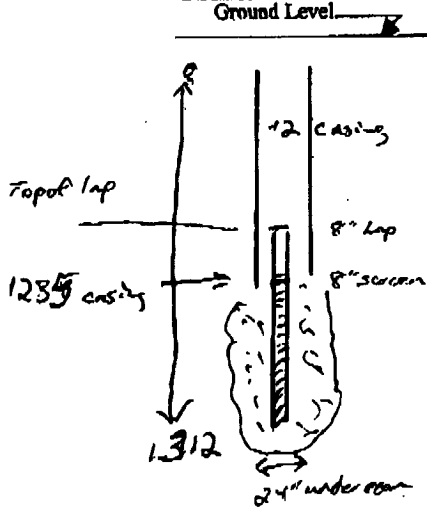
Screen slot size: .20 inches Setting depth: From 1242 feet to 1312 feet

Type of completion (circle all applicable): (Gravel packed) (Underreamed) Telescoped Open hole Natural Development  
 Other (describe): \_\_\_\_\_

Top of lap pipe or reduction in casing: N/A feet. *If telescoped or more than one screen, describe on next page*

The sketch below only required for water wells.

If well telescopes, show depths on sketch.

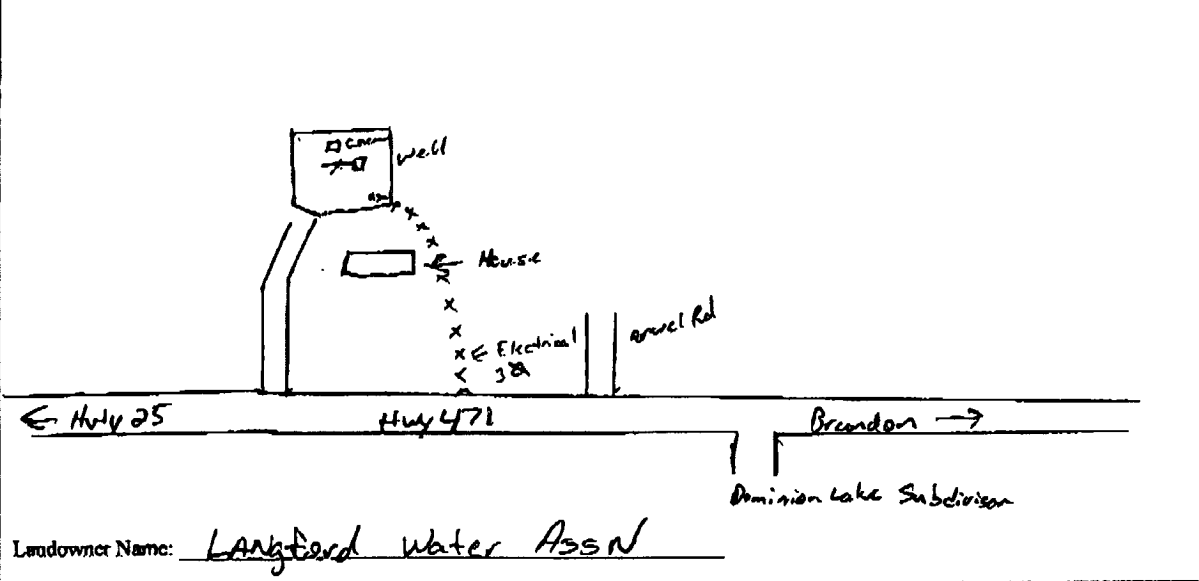


Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth)	To (depth)
Clay / shell streaks	Ground Level	429
sandy clay / sand	429	551
Sand	551	612
Clay with sand streaks	612	736
sand	736	799
Sandy clay shale streaks	799	779
Sandy c. clay / lag	779	1131
sand with / lipids	1131	1194
Sand	1194	1325

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.



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 laws.

C. Ryan Herndon 0-700 1-25-09 [Signature]  
 Print Name of Responsible Licensee and License No. Date Signature of Licensee

Log # G-0074

# 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: Rankin  
 Permit #: \_\_\_\_\_  
 Driller: Donald Smith Company  
 Date completed: Jan. 14, 2010  
*Copy information from block on Part 1*

**For Office Use Only:**  
 Aquifer: \_\_\_\_\_  
 Well #: G0074  
 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.*

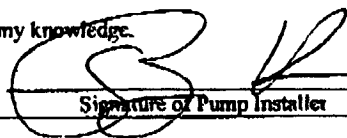
Well Owner Information	Well Location
Owner Name: <u>Langford Water Association</u>	Latitude: <u>32 19 54 W</u> Longitude: <u>89 58 35 W</u>
Mailing Address: <u>1805 Hwy 471</u>	Method of Lat/Long (check one): Conventional Survey _____
<u>Brandon MS 39047</u>	USGS quad _____ Hand-held GPS _____ Survey-grade GPS _____
City State Zip Code	<u>N 1/4 SE 1/4 Sec 27 T 6N R 3E</u>
Telephone No. <u>(601) 591-1467</u>	Distance Direction Nearest Town
	<u>2 Miles N of Brandon</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>150</u>
Date Pump Installed: <u>9-15-2009</u>	Setting Depth: <u>470</u> feet
Rated Pump Capacity: <u>734</u> Gallons Per Minute	Number of Stages: <u>15</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>9-15-2009</u>	<u>Air Line</u> Electric Measuring Line Steel Tape
Static Water Level (A): <u>361</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>409</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>48</u> Feet Below Land Surface	Well yielded <u>734</u> GPM with a drawdown of
Test Pumping Rate: <u>734</u> Gallons Per Minute	<u>48</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.

Ryan Herndon 0-700  
 Print Name of Pump Installer and License No. (if applicable)

  
 Signature of Pump Installer