

STATE WELL REPORT

Part 1

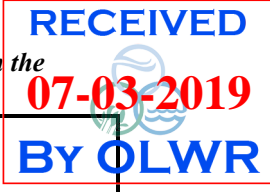
Driller's Log

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225-2309
(601)961-5555
(601)961-5228 (fax)

County: Rankin
Permit #: MS-GW-17267
Driller: Edwin Stephensen
Date drilling completed: 1-4-2018

For Office Use Only:
Well #: G75
Aquifer: _____
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.



Well Owner Information <small>(Landowner if borehole is not for a water well)</small>	Well or Borehole Location
Owner Name: <u>City of Flowood</u>	Latitude: <u>N32.22.0</u> Longitude: <u>W89.59.21</u>
Mailing Address: <u>PO Box 320069</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
<u>Flowood</u> <u>MS</u> <u>39232-0069</u>	<u>NE</u> ¼ <u>NE</u> ¼, Sec <u>16</u> T <u>06N</u> R <u>03E</u>
City State Zip Code	_____ Miles _____ of <u>Brandon, MS</u>
Telephone No. (____) _____	(Distance) (Direction) (Nearest Town)

Well / Borehole Data

Date drilling started: 9-1-2017 Date drilling completed: 01-04-2019 Hole depth: 1530 Hole diameter: 12.25

Location of the source of any surface water used for drilling: Fire hydrant

Method of dosing and volume of Chlorine used in drilling and development: 5 gallon bucket

Logs run (check all applicable): log run Electric Gamma Ray Density Sonic Neutron Other: _____

Name of organization running log(s): Layne Christensen

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 all applicable): Home Industrial Public Supply Irrigation Fish Culture

Other (describe): _____

If a flowing well, method of flow regulation: Valve _____ Other (describe) _____

Static Water Level: 384 feet above or below land surface Date measured: 1-24-2019
(check one)

Method of measurement (check one) Steel tape Electric tape Air line Other (describe): _____

Well depth: 1150 Well grouted to a depth of: 1010 feet Type of grout (check one) Neat Cement Bentonite Mix

Casing length: 1010 feet Casing diameter: 20 inches Type of casing: Steel

Screen length: 135 feet Screen diameter: 12 inches Type of screen: SS, Wire wrap

Screen slot size: 0.020 inches Setting depth: From 1015 feet to 1150 feet

Type of completion (check all applicable) gravel packed Underreamed Open hole Natural Development

Other (describe): _____

Top of lap pipe or reduction in casing: 915 feet

If telescoped or more than one screen, describe on next page

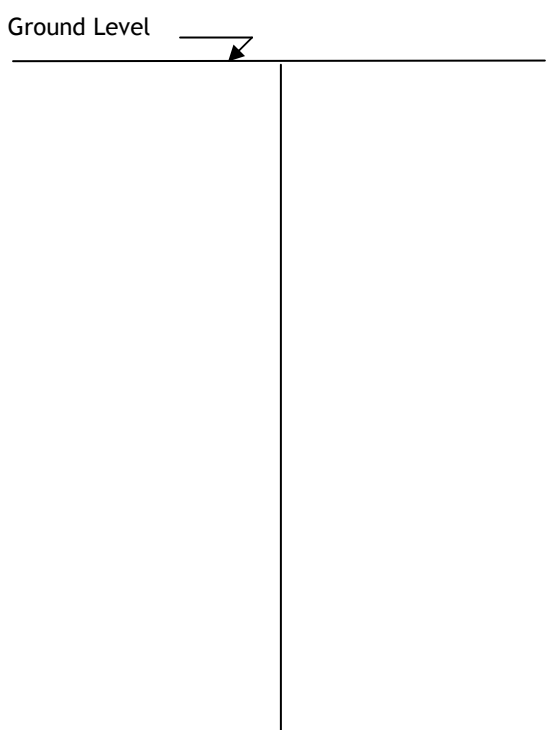
County: Rankin _____
 Permit #: MS-GW-17267 _____



For Office Use Only:
 Well #: **G75** _____

The sketch below only required for water wells

If well telescopes, show depths on sketch.



If more than one screen, show location of each 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)
	Ground level	
Clay	0	55
Blue clay	55	207
Fine sand, sandy shale	207	492
Sandy Shale	492	555
Fine sand with lignite and clay	555	895
Fine sand	895	1110
Medium sand with lignite	1110	1405
Hard shale	1405	1520

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) north arrow

Landowner Name: _____

I HEREBY 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.

Jace A. Rawls 04688 07-01-19 Jace A. Rawls
 Print Name of Responsible Licensee and License No. Date Signature of Licensee

STATE WELL REPORT

Part 2

Pump Installer's Completion Report
 Mississippi Department of Environmental Quality
 Office of Land and Water Resources
 P.O. Box 2309
 Jackson, MS 39225-2309
 (601)961-5210
 (601) 360-0535 (fax)

For Office Use Only:

Well #: **G75**

 Aquifer: _____

County: Rankin
 Permit #: MS-GW-17267
 Driller: Edwin Stephensen
 Date completed: 1-4-2018
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>City of Flowood</u>	Latitude: <u>N32.22.0</u> Longitude: <u>W89.59.21</u>
Mailing Address: <u>PO Box 320069</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
<u>Flowood</u> MS 39232-0069	NE ¼ NE ¼, Sec. 16 T. 06N R. 03E
City State Zip Code	_____ Miles of <u>Brandon, MS</u>
Telephone No. (____) _____	(Distance) (Direction) (Nearest Town)

Pump Type (check one)

Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe): _____

Date Pump Installed: 10-20-2018 Rated Pump Capacity: 1700 Gallons Per Minute

Is This Pump (check one): New Repaired Replacement

Power Type (check one)

Electric Diesel Gasoline Natural Gas Tractor PTO Windmill Other (describe): _____

Horse Power Rating of Motor: 350 Setting Depth: 520 feet Number of Stages: 7

Pump Test Data for Non Flowing Well

Date Well Tested: 1-24-2018 Duration of Pump Test (minimum 4 hours): 24 hours

Static Water Level (A): 384 Feet Below Land Surface Pumping Water Level (B): 431 Feet Below Land Surface

Drawdown [(B) - (A)]: 47 Feet Below Land Surface Test Pumping Rate: 1725 Gallons Per Minute

Method of measurement (check one): Steel tape Electric tape Air line Other (describe): _____

Pump Test Data for Flowing Well

Measured shut in head: _____ feet.

Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping

Meter Installation

Meter Manufacturer: Water Specialities Meter Serial Number: 20180612

Meter Model Number/Name: ML04-12 Type of Meter: _____

Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): 1000

Installation Date: 5-2-2018 Meter installed by: _____

Is This Meter (check one): New Repaired Replacement

RECEIVED

07-03-2019

BY OLWR

Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.

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

<u>Jace A. Rawls</u>	<u>04688</u>	<u>07-01-19</u>	<u>Jace A. Rawls</u>
Print Name of Pump Installer and License No. (if applicable)		Date	Signature of Pump Installer

(MADISON)



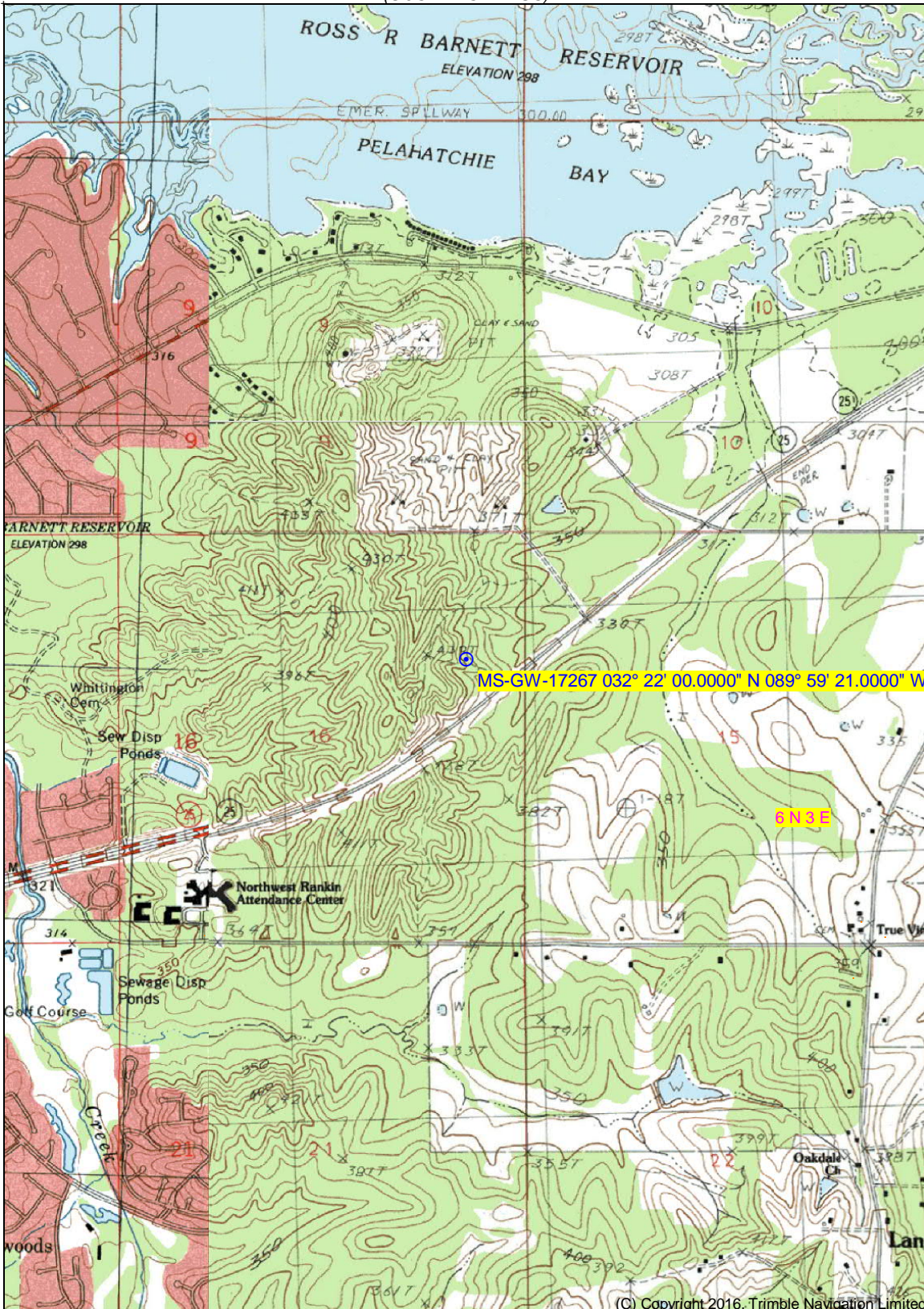
BRANDON QUADRANGLE
MISSISSIPPI
TOPOGRAPHIC SERIES

(LEESBURG)

090° 00' 30.8130" W
032° 23' 23.5987" N

(GOSHEN SPRINGS)

089° 58' 10.6939" W
032° 23' 23.5987" N



(JACKSON SE)

(PELAHATCHIE)

MS-GW-17267 032° 22' 00.0000" N 089° 59' 21.0000" W

(C) Copyright 2016, Trimble Navigation Limited

032° 20' 35.9632" N
090° 00' 30.8130" W

Printed: Wed Jul 03, 2019

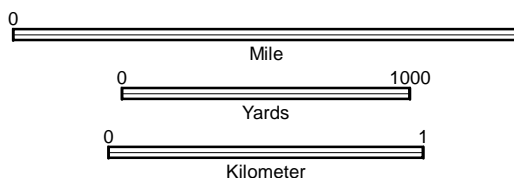
089° 58' 10.6939" W
032° 20' 35.9632" N

(WHITFIELD)

Declination



(PUCKETT NW)
SCALE 1:24000



(JOHNS)

Produced by Trimble Terrain Navigator Pro
Topography based on USGS 1:24,000
Maps

North American 1983 Datum (NAD83)

To place on the predicted North American
1927 move the projection lines 16M N and
8M W

32089-C8-TM-024
BRANDON, MS
JAN 1, 1982

CONTOUR INTERVAL 10 FT