

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)

For Office Use Only:

Well #: **J53**  
 Aquifer: \_\_\_\_\_  
 E-Log #: \_\_\_\_\_

County: Scott  
 Permit #: \_\_\_\_\_  
 Driller: David West  
 Date drilling completed: 10-31-2019

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>Well Owner Information</b>          (Landowner if borehole is not for a water well)</p> <p>Owner Name: <u>Ron Kitchens</u>          Mailing Address: <u>9114 Church Rd</u>  <u>Collinsville MS 39325</u>          City State Zip Code          Telephone No. (601) <u>509-3973</u></p>	<p><b>Well or Borehole Location</b></p> <p>Latitude: <u>32.391106</u> Longitude: <u>-89.723861</u>          Method of Lat/Long (check one): Conventional Survey _____          USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____  <u>NE</u> ¼ <u>SW</u> ¼, Sec. <u>6</u> T <u>6N</u> R <u>6E</u>  <u>2</u> Miles <u>NNW</u> of <u>Moston</u>          (Distance) (Direction) (Nearest Town)</p>
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**Well / Borehole Data**

Date drilling started: 10-30-19 Date drilling completed: 10-31-19 Hole depth: 525' Hole diameter: 6 1/2"  
 Location of the source of any surface water used for drilling: Well water  
 Method of dosing and volume of Chlorine used in drilling and development: Tab's 50ppm  
 Logs run (check all applicable):  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 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: 176 feet  above or  below land surface Date measured: 10-31-2019  
 (check one)  
 Method of measurement (check one)  Steel tape  Electric tape  Air line  Other (describe): Sonar  
 Well depth: 525' Well grouted to a depth of: 40 feet Type of grout (check one)  Neat Cement  Bentonite  Mix  
 Casing length: 485 feet Casing diameter: 4 inches Type of casing: PVC  
 Screen length: 40 feet Screen diameter: 4 inches Type of screen: PVC  
 Screen slot size: .008 inches Setting depth: From 485 feet to 525 feet  
 Type of completion (check all applicable)  gravel packed  Underreamed  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*

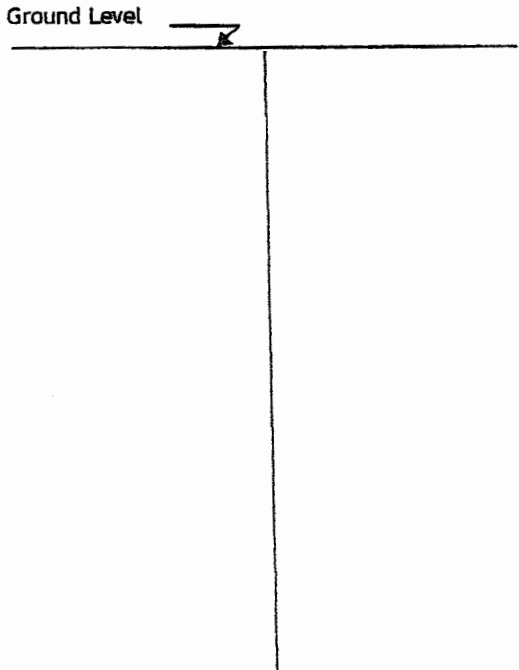
**RECEIVED**  
**11-21-2019**  
**BY OLWR**

County: Scott  
Permit #: \_\_\_\_\_

**For Office Use Only:**  
Well #: J53

The sketch below only required for water wells

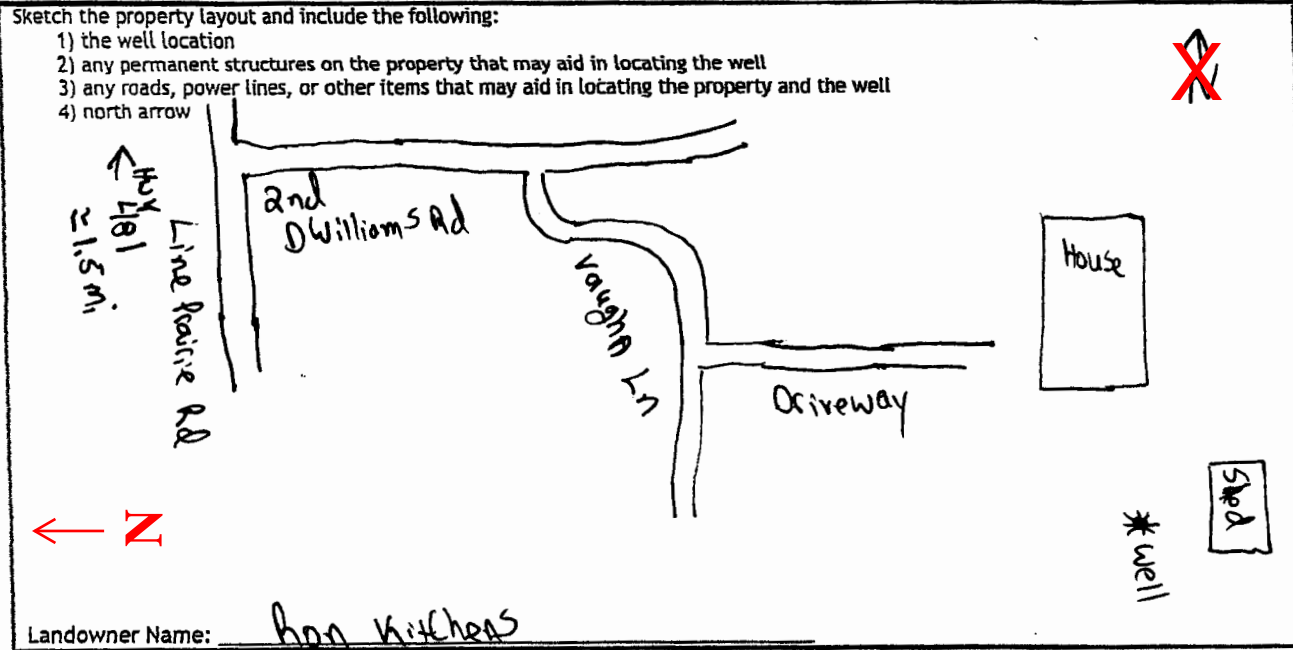
If well telescopes, show depths on sketch.



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	Ground level	82
Clay w/ rock streaks	82	270
Moody's Branch	270	302
Clay	302	370
Sand Fine	370	445
Sand Medium	445	525

If more than one screen, show location of each on sketch



Landowner Name: Don Kitchens

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.

David West 0672      11-19-2019      David West  
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 #: J53
Aquifer:

County: Scott
Permit #:
Driller: David West
Date completed: 10-31-2019
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: Owner Name: Ron Mitchem, Mailing Address: 9114 Church Rd, Collinsville MS 39325, Telephone No. (601) 509-3973
Well Location: Latitude: 32.391106, Longitude: -89.723861, Method of Lat/Long: Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS, 2 Miles NNW of Moston

Pump Type (check one): Submersible [X] Turbine, Air Lift, Centrifugal, Flowing Well, Jet, Piston, Rotary, Other
Date Pump Installed: 11-1-2019, Rated Pump Capacity: 10 Gallons Per Minute
Is This Pump (check one): [X] New, Repaired, Replacement

Power Type (check one): Electric [X] Diesel, Gasoline, Natural Gas, Tractor PTO, Windmill, Other
Horse Power Rating of Motor: 1, Setting Depth: 200 feet, Number of Stages:

Pump Test Data for Non Flowing Well: Date Well Tested, Duration of Pump Test, Static Water Level (A), Pumping Water Level (B), Drawdown [(B) - (A)], Test Pumping Rate, Method of measurement (check one): Steel tape, Electric tape, Air line, Other

Pump Test Data for Flowing Well: Measured shut in head, Well yielded GPM with a drawdown of feet after hours of pumping

Meter Installation: Meter Manufacturer, Meter Serial Number, Meter Model Number/Name, Type of Meter, Totalizer Register Unit and Multiplier Factor, Installation Date, Meter installed by, Is This Meter (check one): New, Repaired, Replacement
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.
David West 0692, 11-19-2019, Signature of Pump Installer

Line Prairie Road

D-Williams Road

123J0053 032.391106° N 089.723861° W