

# 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  
(601)961-5210  
(601)961-5228 (fax)

County: Scott  
Permit #: \_\_\_\_\_  
Driller: McDonald & Hill  
Date drilling completed: 7-27-09

For Office Use Only:  
Aquifer: \_\_\_\_\_  
Well #: N 28  
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)	Well or Borehole Location
Owner Name: <u>Floyd Wayne Stevens</u>	Latitude: <u>32° 17' 08"</u> Longitude: <u>89° 40' 11"</u>
Mailing Address: <u>561 Mahaffey Rd.</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
<u>Morton</u> MS <u>39117</u>	<u>SW 1/4 SE 1/4</u> Sec <u>10</u> Twn <u>5N</u> Rng <u>6E</u>
City State Zip Code	Distance <u>4</u> Miles <u>S</u> of <u>Morton</u>
Telephone No. <u>(985) 517-3389</u>	

**Well / Borehole Data**

Date drilling started: 7-8-09 Date drilling completed: 7-27-09 Hole depth: 660 Hole diameter: 7

Location of the source of any surface water used for drilling: Community  
Method of dosing and volume of Chlorine used in drilling and development: 1 lb per 1,000 gallons

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: Chicken House

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

Static Water Level: 170 feet above or below (circle one) land surface Date measured: 7-27-09

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

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

Casing length: 363 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 20 feet Screen diameter: 2" inches Type of screen: stainless steel

Screen slot size: .004 inches Setting depth: From \_\_\_\_\_ feet to \_\_\_\_\_ 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: 350' feet. *If telescoped or more than one screen, describe on next page*

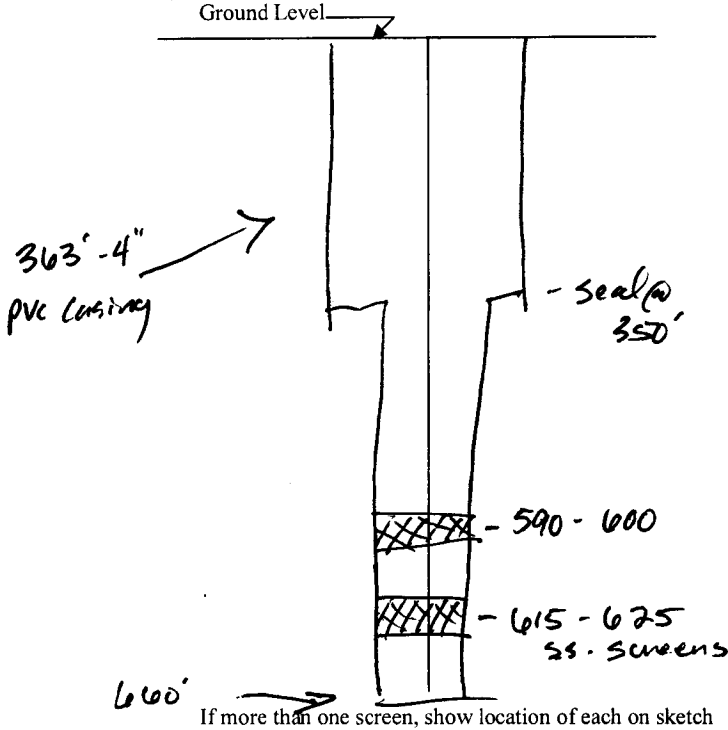
Form: OLWR-SWR-1A (04/08)

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N 28

The sketch below only required for water wells

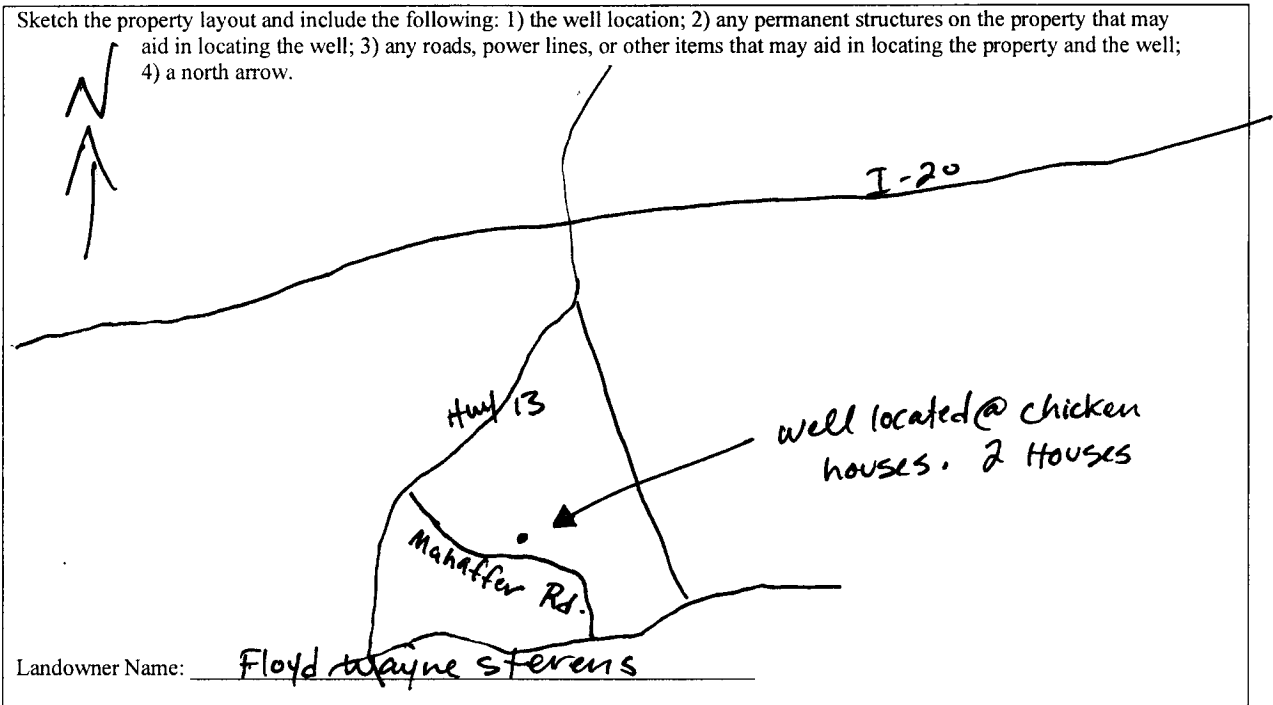
If well telescopes, show depths on sketch.



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	18
Sand	18	25
Chalk	25	380
Sandy Chalk	380	400
Sandy shale	400	425
Sand	425	460
Sandy shale	460	480
shale	480	495
Rock	495	496
shale - Sand Streaks	496	580
shale	580	590
Sand	590	600
Sandy shale	600	615
sand	615	630
Sandy shale	630	660

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 (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.

Harold Hill / McDonald's Hill 0-0

9-20-09

Harold Hill (Signature)

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee

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# 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  
 (601)961-5210  
 (601)961-5228 (fax)

County: Scott  
 Permit #: \_\_\_\_\_  
 Driller: McDonald & Hill  
 Date completed: 8-4-09  
*Copy information from block on Part 1*

**For Office Use Only:**

Aquifer: \_\_\_\_\_  
 Well #: NL28  
 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>Floyd Wayne Stevens</u>	Latitude: <u>32-17-08</u> Longitude: <u>89-40-11</u>
Mailing Address: <u>561 Mahaffey Rd.</u>	Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
<u>Morton</u> <u>MS</u> <u>39117</u> City State Zip Code	<u>SW 1/4 SE 1/4</u> Sec <u>10</u> T <u>5N</u> R <u>6E</u>
Telephone No. <u>(985) 517-3389</u>	Distance Direction Nearest Town <u>4</u> Miles <u>S</u> of <u>Morton</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet <input type="radio"/> <u>Submersible</u>	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston Turbine	<u>Electric Motor</u> Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>7 HP</u>
Date Pump Installed: <u>8-4-09</u>	Setting Depth: <u>310</u> feet
Rated Pump Capacity: <u>19</u> Gallons Per Minute	Number of Stages: <u>16</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>7-27-09</u>	Air Line Electric Measuring Line <u>Steel Tape</u>
Static Water Level (A): <u>170</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>220</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>50</u> Feet Below Land Surface	Well yielded <u>25</u> GPM with a drawdown of
Test Pumping Rate: <u>25</u> Gallons Per Minute	<u>50</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.

Harold Hill / McDonald & Hill / 0-8 Signature of Pump Installer  
 Print Name of Pump Installer and License No. (if applicable)

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

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