

### State Well Report

#### Part 1

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 #: P-59  
 L. S. Elevation: \_\_\_\_\_  
 E-log #: \_\_\_\_\_

County: Smith  
 Permit #: \_\_\_\_\_  
 Driller: David West  
 Date drilling completed: 8-20-08

State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.

Well Owner Information	Well Location
Owner Name: <u>Mike Cowart</u>	Latitude: <u>31° 51' 00"</u> Longitude: <u>89° 34' 00"</u>
Mailing Address: <u>P.O. Box 71</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u> USGS quad, Hand-held GPS, Survey-grade GPS
<u>Mize</u> <u>MS</u> <u>39116</u> City State Zip Code	<u>NE 1/4 SW 1/4 Sec 12</u> <u>Town 10N</u> <u>Rng 16W</u>
Telephone No. <u>(601) 733-0011</u>	Distance <u>1</u> Miles <u>SW</u> of <u>MIZE</u>

#### Well Data

Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other: Pond Fill

Date well drilling started: 8-20-08 Date well drilling completed: 8-20-08

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

Static Water Level: 132' feet above or below (circle one) land surface Date measured: 8-20-08

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

Hole depth: 188 Well depth: 188 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 168 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 20 feet Screen diameter: 4 inches Type of screen: PVC

Screen slot size: .010 inches Setting depth: From 168 feet to 188 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 back of page

Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: \_\_\_\_\_

Name of organization running log(s): \_\_\_\_\_

I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

David West 0-672  
 Print Name of Water Well Contractor and License No.

David West  
 Signature of Water Well Contractor

SEP 18 2008

BY: OLWR

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WEST WATER WELL DRILLING

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p.3

P-59

If well telescopes please sketch below and show depths.

Ground Level

Diagram for well telescopes. A horizontal line is drawn across the top of a vertical rectangle, labeled "Ground Level". The rest of the rectangle is empty, intended for a hand-drawn sketch of well telescopes and their depths.

Description of Formations Encountered	From	To
Clay	0	63
Sand	63	90
Clay	90	129
Sand	129	141
Clay	141	148
Sandy Sand	148	162

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) indicate direction.

Home

Metal Building

Driveway

Pond

Shed

↑ S

Landowner Name: Mike Cowart

Hwy 35

Dave H. W...  
Signature of Water Well Contractor

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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 10631  
 Jackson, MS 39289-0631  
 (601)961-5210  
 (601)354-6938 (fax)

For Office Use Only:

Aquifer: \_\_\_\_\_

Well #: P-59

Elevation: \_\_\_\_\_

County: Smith

Permit #: \_\_\_\_\_

Driller: David West

Date completed: 8-20-08

This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump.

Well Owner Information	Well Location
Owner Name: <u>Mike Cowart</u>	Latitude: <u>31° 51'</u> Longitude: <u>89° 34'</u>
Mailing Address: <u>P.O. Box 71</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>
<u>Mize</u> <u>MS</u> <u>39116</u>	USGS quad, Hand-held GPS, Survey-grade GPS
City State Zip Code	<u>NE 1/4 SW 1/4 Sec 12 Twn 10N Rng 16W</u>
Telephone No. <u>(601) 733-0011</u>	Distance Direction Nearest Town
	<u>1 Miles SW of MIZE</u>

Pump Type Circle one	Power Type Circle one
Air Lift <input type="radio"/> Jet <input type="radio"/> <u>Submersible</u>	Diesel Engine <input type="radio"/> Gasoline Engine <input type="radio"/> Natural Gas <input type="radio"/>
Bucket <input type="radio"/> Piston <input type="radio"/> Turbine <input type="radio"/>	<u>Electric Motor</u> <input type="radio"/> Hand <input type="radio"/> Tractor PTO <input type="radio"/>
Centrifugal <input type="radio"/> Rotary <input type="radio"/> Flowing Well <input type="radio"/>	Windmill <input type="radio"/> Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>5</u>
Date Pump Installed: <u>8-20-08</u>	Setting Depth: <u>180</u> feet
Rated Pump Capacity: <u>55</u> Gallons Per Minute	Number of Stages: _____

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: _____	Air Line <input type="radio"/> Electric Measuring Line <input type="radio"/> Steel Tape <input type="radio"/>
Static Water Level (A): _____ 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 West 0-692  
 Print Name of Pump Installer and License No. (if applicable)

David West  
 Signature of Pump Installer

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