

# 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 #: D-49  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: Stone  
Permit #: \_\_\_\_\_  
Driller: Heath Williams  
Date drilling completed: 06-28-08

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>Michelle Freelanel</u>	Latitude: <u>30° 52' 53"</u> Longitude: <u>088° 54' 43"</u>
Mailing Address: <u>454 A Deep Creek Rd.</u>	Method of Lat/Long (circle one): Conventional Survey,
<u>Wiggins MS 39577</u>	USGS quad, <u>Hand-held GPS</u> Survey-grade GPS
City State Zip Code	<u>SE</u> ¼ <u>SW</u> ¼ Sec <u>8</u> Twn <u>28</u> Rng <u>9W</u>
Telephone No. (____) _____	Distance <u>13</u> Miles Direction <u>East</u> of Nearest Town <u>Wiggins, MS</u>

**Well Data**

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

Date well drilling started: 06-27-08 Date well drilling completed: 06-28-08

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

Static Water Level: 10' feet above or below (circle one) land surface Date measured: 06-27-08

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

Hole depth: 105 Well depth: 105 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 95 feet Casing diameter: 2 inches Type of casing: PVC

Screen length: 10 feet Screen diameter: 0.0082 inches Type of screen: PVC

Screen slot size: 0.008 inches Setting depth: From 95 feet to 105 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: Visual

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.

Heath S. Williams 0-790 Heath S. Williams  
Print Name of Water Well Contractor and License No. Signature of Water Well Contractor

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JUL 25 2008  
BY: OLWR



# 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 #: D-49

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

County: Stone

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

Driller: Heath Williams

Date completed: 6/28/08

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

Owner Name: Michelle Freeland

Mailing Address: 454A Deep Creek Rd

Wiggins MS 39577  
City State Zip Code

Telephone No. (\_\_\_\_) \_\_\_\_\_

### Well Location

Latitude: 30°52'53" Longitude: 88°54'43W

Method of Lat/Long (circle one): Conventional Survey,

USGS quad: Hand-held GPS Survey-grade GPS

\_\_\_\_ ¼ \_\_\_\_ ¼ Sec \_\_\_\_ Twn \_\_\_\_ Rng \_\_\_\_

Distance Direction Nearest Town

10 Miles East of Wiggins

### Pump Type

Circle one

Air Lift  Jet  Submersible  
Bucket  Piston  Turbine  
Centrifugal  Rotary  Flowing Well  
Other (specify): \_\_\_\_\_  
Date Pump Installed: 06-28-08  
Rated Pump Capacity: 7 Gallons Per Minute

### Power Type

Circle one

Diesel Engine  Gasoline Engine  Natural Gas   
 Electric Motor  Hand  Tractor PTO  
Windmill  Other (specify): \_\_\_\_\_  
Horse Power Rating of Motor: 1  
Setting Depth: 80 feet  
Number of Stages: 2

### Pump Test Data

Date Well Tested: 06-28-08  
Static Water Level (A): 10 Feet Below Land Surface  
Pumping Water Level (B): \_\_\_\_\_ Feet Below Land Surface  
Drawdown [(B) - (A)]: \_\_\_\_\_ Feet Below Land Surface  
Test Pumping Rate: \_\_\_\_\_ Gallons Per Minute  
Duration of Pump Test (minimum 4 hours): \_\_\_\_\_ hours

### Method of Measuring Water Level

Circle one

Air Line  Electric Measuring Line   Steel Tape  
Other (specify): \_\_\_\_\_  
For flowing well, measured shut in head: \_\_\_\_\_ feet  
Well yielded \_\_\_\_\_ GPM with a drawdown of \_\_\_\_\_ feet after \_\_\_\_\_ hours of pumping

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

Heath S. Williams 0-790

Print Name of Pump Installer and License No. (if applicable)

Heath S. Williams

Signature of Pump Installer

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JUL 25 2008  
BY: OLWR