

County: Tallahatchie  
 Permit #: QW41415  
 Driller: Pete's Well Drilling  
 Date drilling completed: 11-7-06

**Well Driller Report and Well Log**

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 #: E-58  
 L. S. Elevation: \_\_\_\_\_  
 E-log #: \_\_\_\_\_

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>Jimmy Wallace</u>                          | Latitude: <u>34° 02' 37"</u> Longitude: <u>90° 12' 39"</u>                    |
| Mailing Address: <u>438 Winkley Rd</u>                    | Method of Lat/Long (circle one): <u>Conventional Survey</u>                   |
| <u>Jackson</u> City <u>MS</u> State <u>39301</u> Zip Code | USGS quad: <u>(Hand-held GPS)</u> , Survey-grade GPS                          |
| Telephone No. <u>713 668-2700</u>                         | SW $\frac{1}{4}$ SE $\frac{1}{4}$ Sec <u>17</u> Twn <u>25N</u> Rng <u>1E</u>  |
|   | Distance <u>7</u> Miles Direction <u>NW</u> of Nearest Town <u>Charleston</u> |

**Well Data**

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

Date well drilling started: 11-7-06 Date well drilling completed: 11-7-06

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

Static Water Level: 13 feet above or below (circle one) land surface Date measured: 11-7-06

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

Hole depth: 95 Well depth: 95 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 55 feet Casing diameter: 16 inches Type of casing: PVC

Screen length: 40 feet Screen diameter: 16 inches Type of screen: PVC

Screen slot size: 0.50 inches Setting depth: From 55 feet to 100 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.

Pete's Well Drilling  
 Print Name of Water Well Contractor and License No. 0430

Pete Lopez  
 Signature of Water Well Contractor

If well telescopes please sketch below and show depths.

**RECEIVED**  
 DEC 12 2006  
 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)

County: \_\_\_\_\_  
Permit #: OW 41415  
Driller: \_\_\_\_\_  
Date completed: \_\_\_\_\_

For Office Use Only:

Aquifer: \_\_\_\_\_  
Well #: E-58  
Elevation: \_\_\_\_\_

**This report must be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump. A copy of Part 1 of this report must be attached to this report.**

| Well Owner Information                 | Well Location  |
|--|--|
| Owner Name: <u>Jimmy Wallace</u>       | Latitude: <u>34° 02' 62"</u> Longitude: <u>90° 12' 66"</u>                       |
| Mailing Address: <u>428 Winkler Rd</u> | Method of Lat/Long (circle one): <u>Conventional Survey</u>                      |
| <u>Jackson TN 38301</u>                | USGS quad: <u>Hand-held GPS</u> , Survey-grade GPS                               |
| City State Zip Code                    | ¼ Sec <u>17</u> Twn <u>25N</u> Rng <u>1E</u>                                     |
| Telephone No. ( ) _____                | Distance Direction Nearest Town<br><u>7</u> Miles <u>NW</u> of <u>Charleston</u> |

| Pump Type<br>Circle one                            | Power Type<br>Circle one                         |
|--|--|
| Air Lift Jet Submersible                           | <u>Diesel Engine</u> Gasoline Engine Natural Gas |
| Bucket <u>MOORE CUSTOMER</u> Piston Turbine        | Electric Motor Hand Tractor PTO                  |
| Centrifugal <u>14" TURBINE</u> Rotary Flowing Well | Windmill Other (specify): _____                  |
| Other (specify): _____                             | Horse Power Rating of Motor: _____               |
| Date Pump Installed: _____                         | Setting Depth: <u>50 ft</u> feet                 |
| Rated Pump Capacity: _____ Gallons Per Minute      | Number of Stages: <u>1</u>                       |

| Pump Test Data   | Method of Measuring Water Level<br>Circle one                                     |
|--|---|
| Date Well Tested: _____                                | Air Line Electric Measuring Line Steel Tape                                       |
| 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.

Pete Well Drilling Pete Sepp **RECEIVED**  
Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

DEC 17 2006  
BY: OLWR