

66042128

County: Tallahatchie  
 Permit #: 0268  
 Driller: Will Young  
 Date drilling completed: 7/20/07

**State Well Report**  
**Part 1 - Driller's 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-62  
 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>Frank Melton</u>	Latitude: <u>34° 04' 17"</u> Longitude: <u>90° 14' 82"</u> <u>49</u>
Mailing Address: <u>174 Melton Road</u> <u>Route 2 Box 48</u> <u>Tutwiler, MS 38963</u> City State Zip Code	Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS <u>NE 1/4 N15, Sec 1 Twp 25N Rng 1E</u>
Telephone No. <u>(662) 375-4068</u>	Distance Direction Nearest Town <u>10 Miles East of Webb, MS</u>

**Well / Borehole Data**

Date drilling started: 7/20/07 Date drilling completed: 7/20/07 Hole depth: 105' Hole diameter: 24"

Location of the source of any surface water used for drilling: Ditch

Method of dosing and volume of Chlorine used in drilling and development: \_\_\_\_\_

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: \_\_\_\_\_

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

Static Water Level: 20 feet above or below (circle one) land surface Date measured: 7/20/07

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

Well depth: 105' Well grouted to a depth of All feet Type of grout (circle one): Neat Cement  Bentonite  Mix

Casing length: 65 feet Casing diameter: 16 inches Type of casing: PVC

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

Screen slot size: .050 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: \_\_\_\_\_ feet. *If telescoped or more than one screen, describe on next page*

Form: OLWR-SWR-1A

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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 #: E-62  
Elevation: \_\_\_\_\_

County: Tallahatchie  
Permit #: 0368  
Driller: Will Young  
Date completed: 7/22/07  
*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	Well Location
Owner Name: <u>Frank Melton</u>	Latitude: <u>34° 04' 17"</u> Longitude: <u>90° 14' 82"</u>
Mailing Address: <u>174 Melton Road</u> <u>Route 2 Box 48</u> <u>Tutwiler, MS 38963</u> City State Zip Code	Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____ _____ 1/4 _____ 1/4 Sec _____ T _____ R _____
Telephone No. <u>(662) 375-4068</u>	Distance Direction Nearest Town <u>10</u> Miles <u>NE</u> of <u>Webb, MS</u>

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

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: _____	Air Line      Electric Measuring Line      Steel Tape
Static Water Level (A): <u>20</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>35</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>15</u> 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): <u>4</u> hours	

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

Joel Jumper 0368  
Print Name of Pump Installer and License No. (if applicable)

Joel Jumper  
Signature of Pump Installer

Form: OLWR-SWR-1B

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