

# 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)

County: Tallahatchie  
 Permit #: \_\_\_\_\_  
 Driller: MS. OFFICE OF GEOLOGY  
 Date drilling completed: 11/18/09

For Office Use Only:  
 Aquifer: R14  
 Well #: \_\_\_\_\_  
 L. S. Elevation: 402'  
 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<br>(Landowner if borehole is not for a water well)                    | Well or Borehole Location   |
|---|---|
| Owner Name: <u>Kendall Sand &amp; Gravel</u>  | Latitude: <u>90° 0' 15.313"</u> Longitude: <u>33° 51' 44.499"</u>   |
| Mailing Address: _____<br><u>Cascilla Rd</u><br><u>Cascilla MS 38920</u><br>City State Zip Code | Method of Lat/Long (circle one): Conventional Survey,<br>USGS quad, <del>Hand-held GPS</del> , Survey-grade GPS<br><u>NE 1/4 NE 1/4 Sec 17 Twn 23N Rng 3E</u> |
| Telephone No. ( ) _____   | Distance _____ Miles _____ Direction _____ of _____ Nearest Town _____  |

**Well / Borehole Data**

Date drilling started: 10/26/09 Date drilling completed: 11/18/09 Hole depth: 140' Hole diameter: 5"

Location of the source of any surface water used for drilling: Kendall Gravel Pit

Method of dosing and volume of Chlorine used in drilling and development: 1 gal Chlorine / 1000 gal H<sub>2</sub>O

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: \_\_\_\_\_ feet above or below (circle one) land surface Date measured: \_\_\_\_\_

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: \_\_\_\_\_ feet Casing diameter: \_\_\_\_\_ inches Type of casing: \_\_\_\_\_

Screen length: \_\_\_\_\_ feet Screen diameter: \_\_\_\_\_ inches Type of screen: \_\_\_\_\_

Screen slot size: \_\_\_\_\_ inches Setting depth: From \_\_\_\_\_ feet to \_\_\_\_\_ feet


Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development  
 Other (describe): \_\_\_\_\_

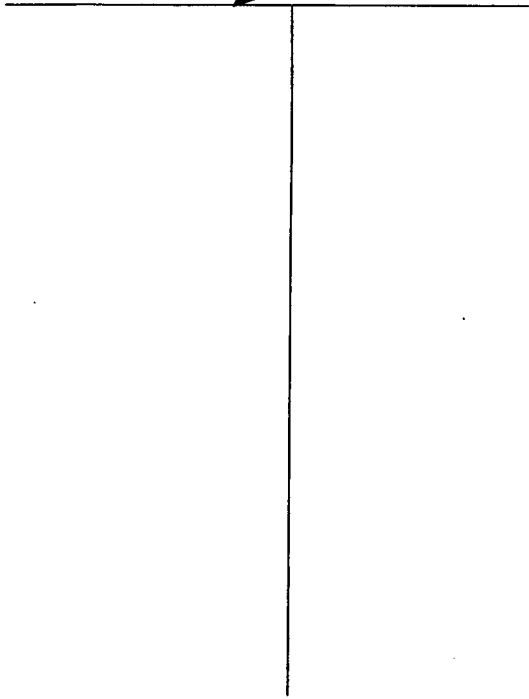
Top of lap pipe or reduction in casing: \_\_\_\_\_ feet. *If telescoped or more than one screen, describe on next page*

RECEIVED  
 DEC 07 2009  
 BY: OLWR

The sketch below only required for water wells

If well telescopes, show depths on sketch.

Ground Level 

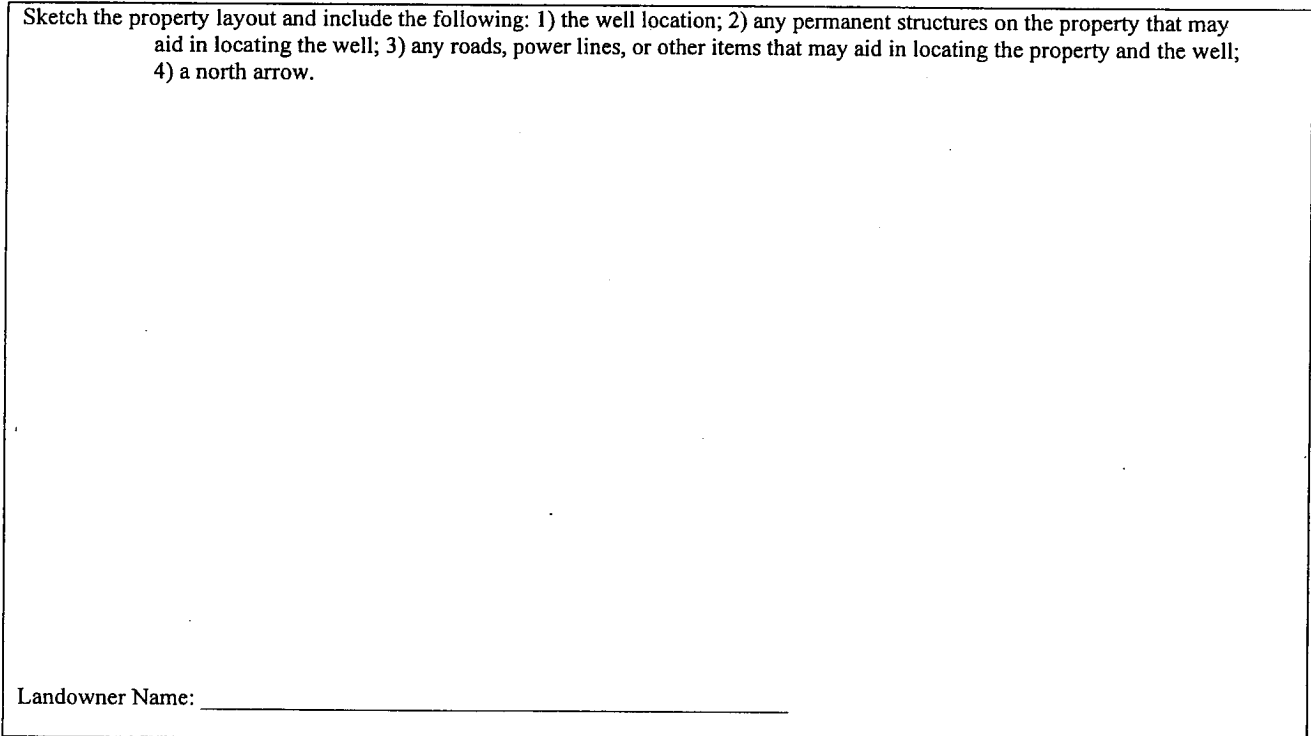


Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

| Description of Formations Encountered | From (depth) | To (depth) |
|---------------------------------------|--------------|------------|
|                                       | Ground Level |            |
| Clay                                  | 0            | 59         |
| Gravel                                | 59           | 100        |
| Sand                                  | 100          | 126        |
| Pea Gravel                            | 126          | 140        |
|                                       |              |            |
|                                       |              |            |
|                                       |              |            |
|                                       |              |            |
|                                       |              |            |
|                                       |              |            |
|                                       |              |            |
|                                       |              |            |
|                                       |              |            |
|                                       |              |            |
|                                       |              |            |

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) a north arrow.



Landowner Name: \_\_\_\_\_


Form: OLWR-SWR-1A

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.

ARCHIE MCKENZIE 0-555

Print Name of Responsible Licensee and License No.

11/20/09  
Date

  
Signature of Licensee