

County: Tate  
 Permit #: \_\_\_\_\_  
 Driller: James W. Mason  
 Date drilling completed: 3-31-05

### 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 #: C-210  
 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>William Parker</u>	Latitude: <u>34° 13' 31"</u> Longitude: <u>089° 49' 51"</u>
Mailing Address: <u>5705 county line rd</u>	Method of Lat/Long (circle one): Conventional Survey,
<u>Coldwater</u> <u>ms.</u> <u>38618</u>	USGS quad, Hand-held GPS, Survey-grade GPS
City State Zip Code	<u>NW 1/4 NE 1/4</u> Sec <u>1</u> Twn <u>4S</u> Rng <u>6W</u>
Telephone No. <u>(662) 233-1587</u>	Distance Direction Nearest Town
	<u>2</u> Miles <u>NW</u> of <u>New garden</u>

**Well Data**

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

Date well drilling started: 3-31-05 Date well drilling completed: 3-31-05

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

Static Water Level: 80 feet above or below (circle one) land surface Date measured: 3-31-05

Method of Measurement (circle one) steel tape electric tape air line other: string / weight

Hole depth: 150' Well depth: 150' Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 140' feet Casing diameter: 4 inches Type of casing: pvc

Screen length: 10 feet Screen diameter: 4 inches Type of screen: pvc

Screen slot size: 010 inches Setting depth: From 140 feet to 150 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: NA 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.

James W. Mason 0-620  
 Print Name of Water Well Contractor and License No.

James W. Mason  
 Signature of Water Well Contractor

If well telescopes please sketch below and show depths.

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**APR 28 2005**  
**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: ~~Waltham~~ Tate  
Permit #: \_\_\_\_\_  
Driller: Jones w Moson  
Date completed: 3-31-05

**For Office Use Only:**

Aquifer: \_\_\_\_\_  
Well #: C-210  
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>William Parker</u>	Latitude: <u>34-19-301</u> Longitude: <u>089,49,858</u>
Mailing Address: <u>5705 Countyline rd.</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS
<u>coldwater</u> <u>ms</u> <u>38618</u> City                      State                      Zip Code	<u>NW 1/4 NE 1/4</u> Sec <u>1</u> Twn <u>45</u> Rng <u>6w</u>
Telephone No. ( <u>662</u> ) <u>233-1587</u>	Distance                      Direction                      Nearest Town <u>2</u> Miles <u>NW</u> of <u>New garden</u>

Pump Type Circle one	Power Type Circle one
Air Lift                      Jet <u>Submersible</u>	Diesel Engine                      Gasoline Engine                      Natural Gas
Bucket                      Piston                      Turbine	<u>Electric Motor</u> Hand                      Tractor PTO
Centrifugal                      Rotary                      Flowing Well	Windmill                      Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>3/4</u>
Date Pump Installed: <u>3-31-05</u>	Setting Depth: <u>130'</u> feet
Rated Pump Capacity: <u>12</u> Gallons Per Minute	Number of Stages: <u>11</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>3-31-05</u>	Air Line                      Electric Measuring Line                      Steel Tape
Static Water Level (A): <u>80'</u> Feet Below Land Surface	Other (specify): <u>String / weight</u>
Pumping Water Level (B): <u>NA</u> Feet Below Land Surface	For flowing well, measured shut in head: <u>NA</u> feet
Drawdown [(B) - (A)]: <u>NA</u> Feet Below Land Surface	Well yielded <u>12</u> GPM with a drawdown of
Test Pumping Rate: <u>12</u> Gallons Per Minute	<u>NA</u> feet after <u>24</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>24</u> hours	

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

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

Jones w Moson  
Signature of Pump Installer

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APR 28 2005

BY: OLWR