

County: CLAITHALL  
 Permit #: \_\_\_\_\_  
 Driller: J.C. Sumrall  
 Date drilling completed: 6/20/11

**State Well Report**  
**Part 1 - Driller's Log**  
 Mississippi Department of Environmental Quality  
 Office of Land and Water Resources  
 P.O. Box 2307  
 Jackson, MS 39225  
 (601)961- 5210  
 (601)961- 5228 (fax)

For Office Use Only:  
 Aquifer: K 95  
 Well #: \_\_\_\_\_  
 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)*  
 Owner Name: Danny Thomas  
 Mailing Address: 60 Boyce Morris Rd  
Tylertown, MS  
 City State Zip Code \_\_\_\_\_  
 Telephone No. ( ) \_\_\_\_\_

**Well or Borehole Location**  
 Latitude: 31° 05' 12" Longitude: 89° 58' 09"  
 Method of Lat/Long (circle one): Conventional Survey,  
 USGS quad, Hand-held GPS, Survey-grade GPS  
NW 1/4 NW 1/4 Sec 2 Twn 1N Rng 12E  
 Distance Direction Nearest Town  
6 Miles E of Tylertown

**Well / Borehole Data**  
 Date drilling started: 6/20/11 Date drilling completed: 6/20/11 Hole depth: 150 Hole diameter: 7 1/2  
 Location of the source of any surface water used for drilling: POTABLE WATER  
 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: 90 feet above or below (circle one) land surface Date measured: 6/20/11  
 Method of Measurement (circle one) steel tape electric tape air line other: \_\_\_\_\_  
 Well depth: 150 Well grouted to a depth of 10 feet Type of grout (circle one): Neat 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: PVE  
 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: \_\_\_\_\_ feet. *If telescoped or more than one screen, describe on next page*

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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 2309  
 Jackson, MS 39225  
 (601)961-5210  
 (601)961-5228 (fax)

County: Walthall  
 Permit #: \_\_\_\_\_  
 Driller: J.C. Sumal  
 Date completed: 6/20/11  
*Copy information from block on Part 1*

**For Office Use Only:**

Aquifer: \_\_\_\_\_  
 Well #: \_\_\_\_\_  
 Elevation: \_\_\_\_\_

*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>Danny Thomas</u>	Latitude: _____ Longitude: _____
Mailing Address: <u>60 Boyce Morris Rd</u> <u>Tybertown, Ms</u>	Method of Lat/Log (check one): Conventional Survey _____ USGS quad _____ Hand-held GPS _____ Survey-grade GPS _____
City _____ State _____ Zip Code _____	_____ 1/4 _____ 1/4 Sec <u>2 T 1 R 12E</u>
Telephone No. ( ) _____	Distance _____ Direction _____ Nearest Town _____
	<u>6</u> Miles <u>E</u> of <u>Tybertown</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>1</u>
Date Pump Installed: <u>6/20/11</u>	Setting Depth: _____ feet
Rated Pump Capacity: <u>10</u> Gallons Per Minute	Number of Stages: <u>15</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>6/20/11</u>	Air Line _____ Electric Measuring Line _____ <u>Steel Tape</u>
Static Water Level (A): <u>90</u> 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 <u>10</u> GPM with a drawdown of _____ feet after <u>4</u> hours of pumping
Test Pumping Rate: <u>10</u> 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.

Jordan Well Serv. 0-508 \_\_\_\_\_  
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

JUN 23 2011  
 BY: [Signature]