

Wednesday, July 27, 2005 12:56 PM

Bill Schultz 662.335.5777

p.01

State Well Report Part 1

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: Washington
 Permit #: MS60W 00456
 Driller: Charles M. Nichols
 Date drilling completed: 6-28-05

For Office Use Only:
 Aquifer: _____
 Well #: E-176
 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>DARREL KINGSTON</u>	Latitude: <u>33° 26' 37" N</u>	Longitude: <u>90° 52' 19" W</u>	
Mailing Address: <u>49 Elizabeth Rd</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS		
<u>Leland</u> MS <u>38756</u>	<u>NE 1/4 NE 1/4 Sec 1 Twn 18N Rng 7W</u>		
City State Zip Code	Distance	Direction	Nearest Town
Telephone No. () _____	<u>2</u> Miles	<u>N</u> of	<u>Leland</u>

Well Data

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

Date well drilling started: 6-28-05 Date well drilling completed: 6-28-05

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

Static Water Level: 24 feet above or below (circle one) land surface Date measured: 6-29-05

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

Hole depth: 106 Well depth: 106 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 166 feet Casing diameter: 16 inches Type of casing: PVC

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

Screen slot size: 33 inches Setting depth: From 66 feet to 106 feet

Type of completion (circle all applicable): Gravel packed Undrilled 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.

Charles M. Nichols 0-0667 Charles M. Nichols
 Print Name of Water Well Contractor and License No. Signature of Water Well Contractor

RECEIVED
 JUL 27 2005
 BY: OLWR

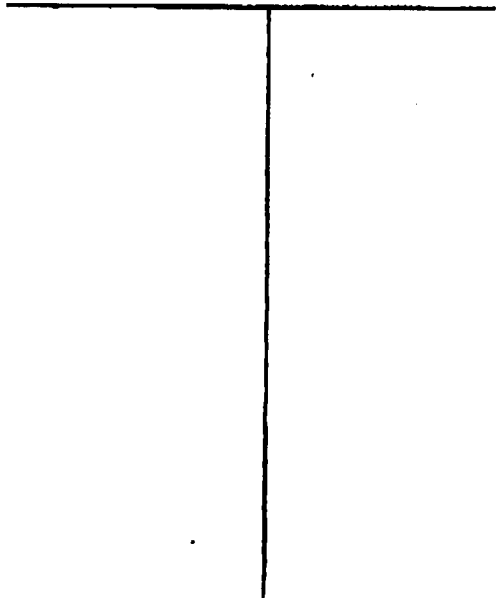
Wednesday, July 27, 2005 12:58 PM

Bill Schultz 662.335.5777

p.02

E-176

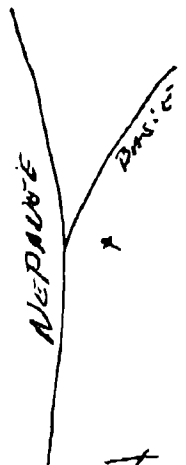
Ground Level



Description of Formations Encountered	From	To
clay	0	18
sand	18	51
sand mud	51	60
sand coarse gravel	60	70
sand gravel	70	100

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) indicate direction.



Landowner Name: DARREL LIVINGSTON

Charles M. ...
 Signature of Water Well Contractor

RECEIVED
 JUL 27 2005
 BY: OLWR

Wednesday, July 27, 2005 12:58 PM

Bill Schultz 662.335.5777

p.03

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)334-6938 (fax)

For Office Use Only:

Aquifer:

Well #: E-176

Elevation:

County: Washington
Permit #: MS6W 40456
Driller: Charles M. Schultz
Date completed: 6-29-05

This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump.

Well Owner Information

Owner Name: David Livingston
Mailing Address: 49 Elizabeth Rd
Tuland MS 38756
City State Zip Code

Well Location

Latitude: 33° 26' 37" Longitude: 89° 52' 19" W
Method of Lat/Long (circle one): Conventional Survey,
USGS quad, Hand-held GPS, Survey-grade GPS
Distance Direction Nearest Town
2 Miles N of Lumberton

Pump Type
Circle one

Air Lift Jet Submersible
Bucket Piston Turbine
Centrifugal Rotary Flowing Well

Power Type
Circle one

Diesel Engine Gasoline Engine Natural Gas
Electric Motor Hand Tractor PTO
Windmill Other (specify):
Horse Power Rating of Motor: 60
Sensing Depth: 60 feet
Number of Stages: 1

Pump Test Data

Date Well Tested:
Static Water Level (A): Feet Below Land Surface
Pumping Water Level (B): Feet Below Land Surface
Drawdown (B) - (A): Feet Below Land Surface
Test Pumping Rate: Gallons Per Minute
Duration of Pump Test (minimum 4 hours): hours

Method of Measuring Water Level
Circle one

Air Line Electric Measuring Line Steel Tape
Other (specify):
For flowing well, measured shut in head: feet
Well yielded GPM with a drawdown of
feet after hours of pumping

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

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

Signature of Pump Installer

RECEIVED

JUL 27 2005

BY: OLWR