

**State Well Report**

**Part 1 - Driller's Log**

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)

For Office Use Only:

Aquifer: \_\_\_\_\_  
Well #: G353  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: WASHINGTON  
Permit #: GW-4605J  
Driller: J. NEWCOMB 0-773  
Date drilling completed: 4-17-13

*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>Pittman Farms</u>	Latitude: <u>33° 17' 20"</u> Longitude: <u>91° 02' 33"</u>
Mailing Address: <u>2292 UFW Road</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS
<u>Greenville MS 38701</u>	<u>IR 1/4 IR 1/4 Sec 03 Twn 17N Rng 08W</u>
City State Zip Code	Distance Direction Nearest Town <u>7</u> Miles <u>S</u> of <u>GREENVILLE</u>
Telephone No. ( ) _____	

**Well / Borehole Data**

Date drilling started: 4-17-13 Date drilling completed: 4-17-13 Hole depth: 102 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: CHLORINE TABLETS

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: 100 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 60 feet Casing diameter: 16 inches Type of casing: P.J.C.

Screen length: 40 feet Screen diameter: 16 inches Type of screen: P.J.C.

Screen slot size: .050 inches Setting depth: From 10 feet to 100 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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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)

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Aquifer: \_\_\_\_\_  
Well #: 6353  
Elevation: \_\_\_\_\_

County: Washington  
Permit #: GW-46505  
Driller: J. Newcome 0773  
Date completed: 4/17/13

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	Well Location
Owner Name: <u>Pittman Farms</u>	Latitude: <u>33°17'20</u> Longitude: <u>91°02'33</u>
Mailing Address: <u>2292 VFW Road</u>	Method of Lat/Long (circle one): Conventional Survey.
<u>Greenville MS 38701</u>	USGS quad: <u>Hand-held GPS</u> Survey-grade C
City State Zip Code	<u>IR 1/4 IR 1/4 Sec 03 Twn 17N Rng 08E</u>
Telephone No. ( ) _____	Distance Direction Nearest Town
	<u>7 Miles S of Greenville</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet <input type="checkbox"/> <u>Submersible</u>	Diesel Engine Gasoline Engine Natural
Bucket Piston <input type="checkbox"/> Turbine <input type="checkbox"/>	<u>Electric Motor</u> Hand Tractor
Centrifugal Rotary <input type="checkbox"/> Flowing Well <input type="checkbox"/>	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>50HP</u>
Date Pump Installed: <u>4/17/13</u>	Setting Depth: <u>70</u> feet
Rated Pump Capacity: <u>2000</u> Gallons Per Minute	Number of Stages: <u>1</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: _____	Air Line Electric Measuring Line Steel Tap
Static Water Level (A): _____ Feet Below Land Surface	Other (specify): <u>Not Tested</u>
Pumping Water Level (B): _____ Feet Below Land Surface	For flowing well, measured shut in head: _____
Drawdown [(B) - (A)]: <u>Not Tested</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): _____ hours	

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

Hubbard Stephens 741-P Hubbard Stephens  
Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

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