

# 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: WAYNE  
Permit #: 0205  
Driller: R.F. CARR  
Date drilling completed: 1-8-07

For Office Use Only:  
Aquifer: \_\_\_\_\_  
Well #: P-76  
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)	Well or Borehole Location
Owner Name: <u>GARY WAYNE BEASLEY</u>	Latitude: <u>33° 30' 04.9"</u> Longitude: <u>89° 29' 18"</u>
Mailing Address: <u>139 MARTIN SUNLITE RD</u> <u>BUCKATUNNA MS 39322</u>	Method of Lat/Long (circle one): <u>03</u> Conventional Survey, <u>18</u> USGS quad, <u>(Hand-held GPS)</u> Survey-grade GPS <u>276</u>
City _____ State _____ Zip Code _____	NW 1/4 N 1/4 Sec <u>9</u> Twn <u>8N</u> Rng <u>5W</u>
Telephone No. <u>(601) 735 0495</u>	Distance _____ Direction _____ Nearest Town _____ <u>2 1/2</u> Miles <u>EAST</u> of <u>WAYNESBORO</u>

**Well / Borehole Data**

Date drilling started: 1-2-07 Date drilling completed: 1-4-07 Hole depth: 196 Hole diameter: 6 3/4

Location of the source of any surface water used for drilling: WELL WATER TRY WELL

Method of dosing and volume of Chlorine used in drilling and development: 1 PT WITH 2 1000 GAL TANK

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: 108 feet above or below (circle one) land surface Date measured: 1-8-07

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

Well depth: 196 Well grouted to a depth of 20 feet Type of grout (circle one) Neat Cement Bentonite Mix

Casing length: 123 feet Casing diameter: 4" inches Type of casing: PVC

Screen length: N/A feet Screen diameter: N/A inches Type of screen: N/A

Screen slot size: N/A 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**

Form: OLWR-SWR-1A  
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BY TILIA

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	
Red SAND		16
White Coarse SI	16	48
pink & white CLAY	48	70
Med to Coarse SD w/CLAY	70	79
CLAY & SAND ROCK	79	88
CREAMY CLAY	88	93
ROCK	93	94
BROKEN ROCK & CLAY	94	97
Blue CLAY w/ROCK ST	97	140
GRAY CLAY	140	172
LIME ROCK	172	195
white CLAY	195	196

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.

WAYNESBORO HWY 45 SOUTH TO DYCESS BRIDGE RD LEFT  
 APPROX 1/2 mile County LAKE DENHAM RD RIGHT GO PAST  
 DENHAM CHURCH TO PROGRESS DENHAM RD LEFT CAN  
 SEE BUC CREEK BRIDGE CROSS BRIDGE APP 300 YDS PARM. R  
 HOLLING RD LEFT APPROX 1/2 mile LEFT DIRT RD  
 MARTIN SUNLITE RD APP 1/2 mile ON Hill RIGHT  
 BIG HILL ON TOP Hill

Landowner Name: GARY WAYNE BEASLEY

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.

GILBERT CARR                      1-4-07  
Print Name of Responsible Licensee and License No.                      Date

Gilbert Carr  
Signature of Licensee

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BY: OVAE

# 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: WAYNE  
 Permit #: 0205  
 Driller: AG CARR  
 Date completed: 1-8-07  
*Copy information from block on Part 1*

**For Office Use Only:**

Aquifer: \_\_\_\_\_  
 Well #: P-76  
 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>GARY WAYNE BEASLEY</u>	Latitude: <u>88° 30' 49"</u> Longitude: <u>394° - 29'</u>
Mailing Address: <u>139 MARTIN SON LITE RD</u>	Method of Lat/Long (check one): Conventional Survey <u>03</u>
<u>BUCKATONNA MS 39322</u>	USGS quad _____, Hand-held GPS <u>276</u> , Survey-grade GPS _____
City State Zip Code	<u>NW 1/4 N 1/4 Sec 9 T8N R5W</u>
Telephone No. <u>(601) 735-0495</u>	Distance Direction Nearest Town <u>7 1/2 Miles EAST of WAYNESBORO</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet <input type="radio"/> <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 1/2</u>
Date Pump Installed: <u>1-6-07</u>	Setting Depth: <u>160</u> feet
Rated Pump Capacity: <u>19</u> Gallons Per Minute	Number of Stages: <u>10</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>1-6-07</u>	Air Line Electric Measuring Line Steel Tape <u>X</u>
Static Water Level (A): <u>108</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>152</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>44</u> Feet Below Land Surface	Well yielded <u>20</u> GPM with a drawdown of
Test Pumping Rate: <u>20</u> Gallons Per Minute	<u>44</u> feet after <u>22</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>22</u> hours	

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

GILBERT CARR 0205 \_\_\_\_\_  
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

Form OLWR-SWR-1B  
 FEB 05 2007  
 BY [Signature]