

337

# STATE WELL REPORT

## Part I

### Driller's Log

Mississippi Department of Environmental Quality  
 Office of Land and Water Resources  
 P.O. Box 2309  
 Jackson, MS 39225-2309  
 (601)961-5210  
 (601)360-0535 (fax)

### For Office Use Only:

Well #: K 14  
 Aquifer: \_\_\_\_\_  
 E-Log #: \_\_\_\_\_

County: Webster  
 Permit #: MS-6W-17504  
 Driller: Donald Smith Co. Inc.  
 Date drilling completed: 9/24/2020

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.

Well Owner Information (Landowner if borehole is not for a water well)	Well or Borehole Location
Owner Name: <u>Sun Creek Water Assoc.</u>	Latitude: <u>33 35 40.7N</u> Longitude: <u>89 01 52.0 W</u>
Mailing Address: <u>P.O. Box 80003</u>	Method of Lat/Long (check one): Conventional Survey _____
<u>Phoca</u> MS <u>39755</u>	USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
City State Zip Code	<u>SW 1/4 SW 1/4, Sec 15 T. 20N R. 12E</u>
Telephone No. ( ) _____	<u>22.5</u> Miles <u>West</u> of <u>West Point</u>
	(Distance) (Direction) (Nearest Town)

**Well / Borehole Data**

Date drilling started: 8/17/2020 Date drilling completed: 9/24/2020 Hole depth: 1830' Hole diameter: 17 3/4"

Location of the source of any surface water used for drilling: Potable Water Used

Method of dosing and volume of Chlorine used in drilling and development: Public Water Supply

Logs run (circle all applicable): No log run  Electric  Gamma Ray  Density  Sonic  Neutron Other: \_\_\_\_\_

Name of organization running log(s): MS Office of Geology

Purpose of borehole (circle 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 (circle all applicable): Home Industrial  Public Supply Irrigation Fish Culture

Other (describe): \_\_\_\_\_

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

Static Water Level: 197.45' feet [above or below] land surface (circle one) Date measured: 10/14/2020

Method of measurement (circle one): Steel tape  Electric tape  Air line Other (describe): \_\_\_\_\_

Well depth: 1745' Well grouted to a depth of: 1670' feet Type of grout (circle one):  Neat Cement  Bentonite Mix

Casing length: 1670' feet Casing diameter: 12" inches Type of casing: Carbon Steel

Screen length: 70" feet Screen diameter: 8" inches Type of screen: Stainless Steel

Screen slot size: .030 inches Setting depth: From 1675' feet to 1745' feet

Type of completion (circle all applicable):  Gravel packed  Underreamed  Open hole  Natural Development

Other (describe): \_\_\_\_\_

Top of lap pipe or reduction in casing: 1605' feet

*If telescoped or more than one screen, describe on next page*

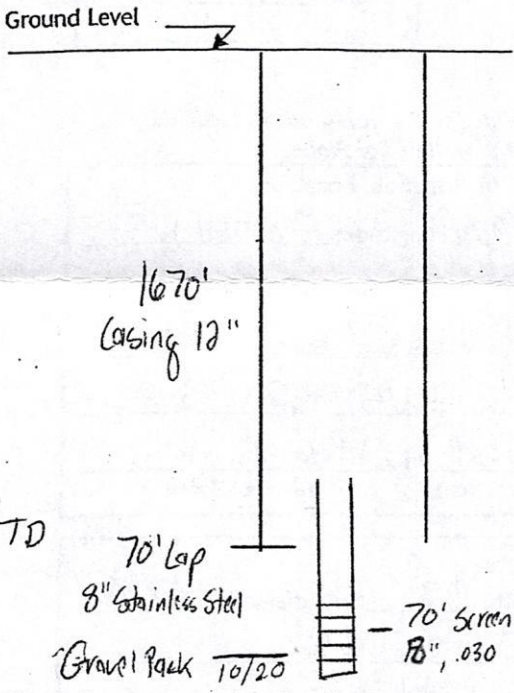
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 BY OLWR

County: Webster  
 Permit #: MS-GW-17504

For Office Use Only:  
 Well #: \_\_\_\_\_

The sketch below only required for water wells  
If well telescopes, show depths on sketch.

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)
Red, Sandy Clay	Ground level	32
Blue Clay	32	245
Blue Clay w/ chalk streaks	245	390
Blue Clay w/ red clay streaks	390	430
Blue Clay w/ chalk streaks	430	890
Blue Clay, hard	890	1030
Sand w/ blue clay streaks	1030	1113
Sand	1113	1169
Blue Clay, real chunky	1169	1195
Blue Clay w/ shale & chalk streaks	1195	1391
Blue clay w/ red, white & gray rock	1391	1423
Chalk w/ Blue clay streaks (sandy)	1423	1438
Rock	1438	1440
Gravel, light sand & shale	1440	1451
Shale, blue clay	1451	1513
Chalk, shale, pink gumbo	1513	1520
Pink gumbo	1520	1615
Gravel & sand	1615	1800
Pink gumbo	1800	1830

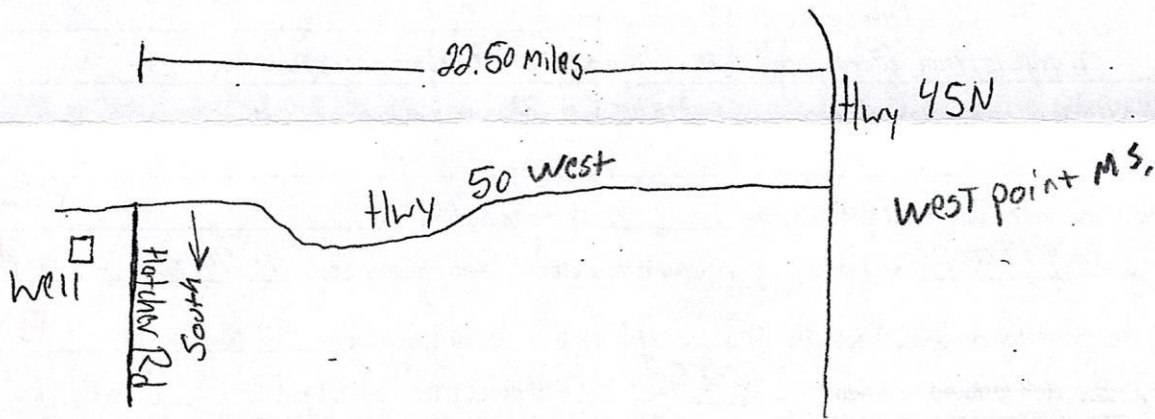
1745' TD

70' Lap  
 8" Stainless Steel  
 Gravel Pack 10/20  
 70' Screen  
 18", .030

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) north arrow



Landowner Name: Sun Creek Water Assoc.

I HEREBY 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.

Robert Young Jr. <sup>UNR 5671</sup> 4-6-21 Robert Young Jr.  
 Print Name of Responsible Licensee and License No. Date Signature of Licensee

# 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 39225-2309  
 (601)961-5210  
 (601) 360-0535 (fax)

County: Webster  
 Permit #: MS-GW-17504  
 Driller: Donald Smith Company, Inc  
 Date completed: 12/15/2021  
*Copy information from block on Part 1*

**For Office Use Only:**

Well #: K 14  
 Aquifer: \_\_\_\_\_

*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>Sun Creek Water Association</u>	Latitude: <u>33 35'40.7"N</u> Longitude: <u>89 01'57.0"W</u>
Mailing Address: <u>P.O. Box 80003</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
<u>Pheba</u> <u>MS</u> <u>39755</u> City State Zip Code	<u>SW</u> 1/4 <u>SW</u> 1/4, Sec <u>15</u> T. <u>20N</u> R. <u>12E</u>
Telephone No. (____) _____	<u>22.5</u> Miles <u>West</u> of <u>West Point</u> (Distance) (Direction) (Nearest Town)

**Pump Type (circle one)**

Submersible  Turbine  Air Lift  Centrifugal  Flowing Well  Jet  Piston  Rotary  Other (describe): \_\_\_\_\_

Date Pump Installed: September 1, 2021 Rated Pump Capacity: 354 Gallons Per Minute

Is This Pump (circle one):  New  Repaired  Replacement

**Power Type (circle one)**

Electric  Diesel  Gasoline  Natural Gas  Tractor PTO  Windmill  Other (describe): \_\_\_\_\_

Horse Power Rating of Motor: 50 Setting Depth: 298 feet Number of Stages: 13

**Pump Test Data for Non Flowing Well**

Date Well Tested: September 15, 2021 Duration of Pump Test (minimum 4 hours): 4 hours

Static Water Level (A): 195 Feet Below Land Surface Pumping Water Level (B): 215 Feet Below Land Surface

Drawdown [(B) - (A)]: 20 Feet Below Land Surface Test Pumping Rate: 354 Gallons Per Minute

Method of measurement (circle one): Steel tape  Electric tape  Air line  Other (describe): \_\_\_\_\_

**Pump Test Data for Flowing Well**

Measured shut in head: \_\_\_\_\_ feet.

Well yielded \_\_\_\_\_ GPM with a drawdown of \_\_\_\_\_ feet after \_\_\_\_\_ hours of pumping

**Meter Installation**

Meter Manufacturer: Master Meter Meter Serial Number: 305D1D09

Meter Model Number/Name: Octave Type of Meter: Ultra Sonic

Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): GPM

Installation Date: 09/01/2021 Meter installed by: Donald Smith Company, Inc

Is This Meter (circle one):  New  Repaired  Replacement

*Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.*

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

Robert Young UNR-5671 1-20-22 Robert Young  
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer

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