

911 Morris Mac Well #C

1133

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

### For Office Use Only:

Well #: M40  
Aquifer: \_\_\_\_\_  
E-Log #: \_\_\_\_\_

County: Wilkinson  
 Permit #: BW 17173  
 Driller: John W Thompson  
 Date drilling completed: 11-15-14

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 <small>(Landowner if borehole is not for a water well)</small>	Well or Borehole Location
Owner Name: <u>Sanchez Oil + Gas</u>	Latitude: <u>31° 06' 37.9"</u> Longitude: <u>91° 21' 41.5"</u>
Mailing Address: <u>P.O. Box 61859</u> <u>Houston TX 77208</u>	Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
City: <u>Elizabeth Gellon</u> State: _____ Zip Code: _____	<u>SE</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$ , Sec <u>34</u> T <u>2N</u> R <u>2W</u>
Telephone No. ( ) _____	<u>3</u> Miles <u>W</u> of <u>Woodville</u> (Distance) (Direction) (Nearest Town)

**Well / Borehole Data**

Date drilling started: 11-15-14 Date drilling completed: 11-21-14 Hole depth: 728' Hole diameter: 10 1/2 x 5 3/8

Location of the source of any surface water used for drilling: Local water well

Method of dosing and volume of Chlorine used in drilling and development: added 30 gallons bleach to makeup water

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

Name of organization running log(s): \_\_\_\_\_

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): Frac supply

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

Static Water Level: 333 feet [above or below] land surface Date measured: 12/4/14  
(circle one)

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

Well depth: 728 Well grouted to a depth of: 665 feet Type of grout (circle one):  Neat Cement  Bentonite  Mix

Casing length: 665 feet Casing diameter: 6 inches Type of casing: Steel

Screen length: 63 feet Screen diameter: 4 inches Type of screen: Prepared stainless

Screen slot size: .010 inches Setting depth: From 665 feet to 728 feet

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

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

Top of lap pipe or reduction in casing: 643 feet

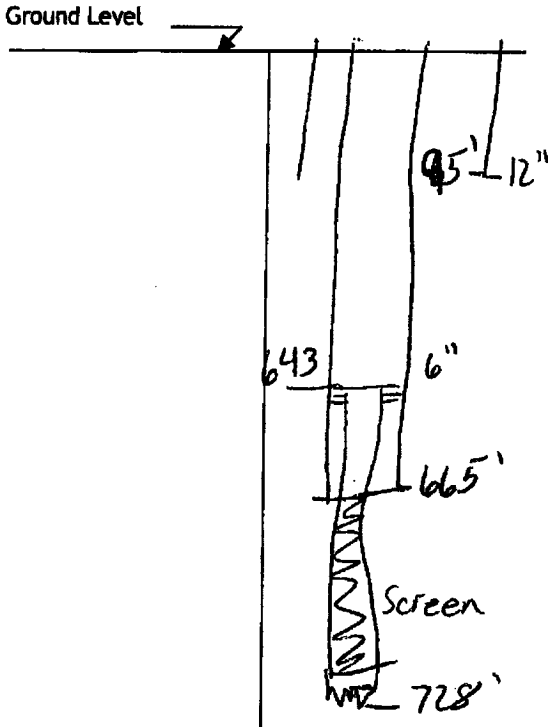
*If telescoped or more than one screen, describe on next page*

County: Wilkinson  
 Permit #: GW 17173

**For Office Use Only:**  
 Well #: M 40

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)
Sand & gravel	Ground level	90
Clay	90	160
Sand	160	180
Clay	180	220
sand	220	240
Clay	240	280
Sand	280	320
clay	320	350
fine sand	350	380
clay	380	420
sand & clay	420	580
sand & clay	580	660
sand	660	728

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: Sanchez Oil & Gas

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.

John W Thompson 0-679      12-8-14      John W Thompson  
 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)

**For Office Use Only:**

Well #: M 42  
 Aquifer: \_\_\_\_\_

County: Wilkinson  
 Permit #: GW 17173  
 Driller: John W Thompson  
 Date completed: 11-15-14  
*Copy information from block on Part 1*

*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>Sanchez Oil &amp; Gas</u>			Latitude: <u>31°06'37.9"</u> Longitude: <u>91°21'41.5"</u>	
Mailing Address: <u>P.O. Box 61859</u> <u>Houston TX 77208</u>			Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____	
City _____ State _____ Zip Code _____			<u>SE</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$ , Sec <u>34</u> T <u>2N</u> R <u>2W</u>	
Telephone No. (____) _____			<u>3</u> Miles <u>W</u> of <u>Woodville</u> (Distance) (Direction) (Nearest Town)	

**Pump Type (circle one)**

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

Date Pump Installed: 12-2-14    Rated Pump Capacity: 300 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: 441 feet    Number of Stages: \_\_\_\_\_

**Pump Test Data for Non Flowing Well**

Date Well Tested: 12/4/14    Duration of Pump Test (minimum 4 hours): 5 hours

Static Water Level (A): 333 Feet Below Land Surface    Pumping Water Level (B): 367 Feet Below Land Surface

Drawdown [(B) - (A)]: 34 Feet Below Land Surface    Test Pumping Rate: 310 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: Badger    Meter Serial Number: \_\_\_\_\_

Meter Model Number/Name: T450-LL    Type of Meter: \_\_\_\_\_

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

Installation Date: \_\_\_\_\_    Meter installed by: \_\_\_\_\_

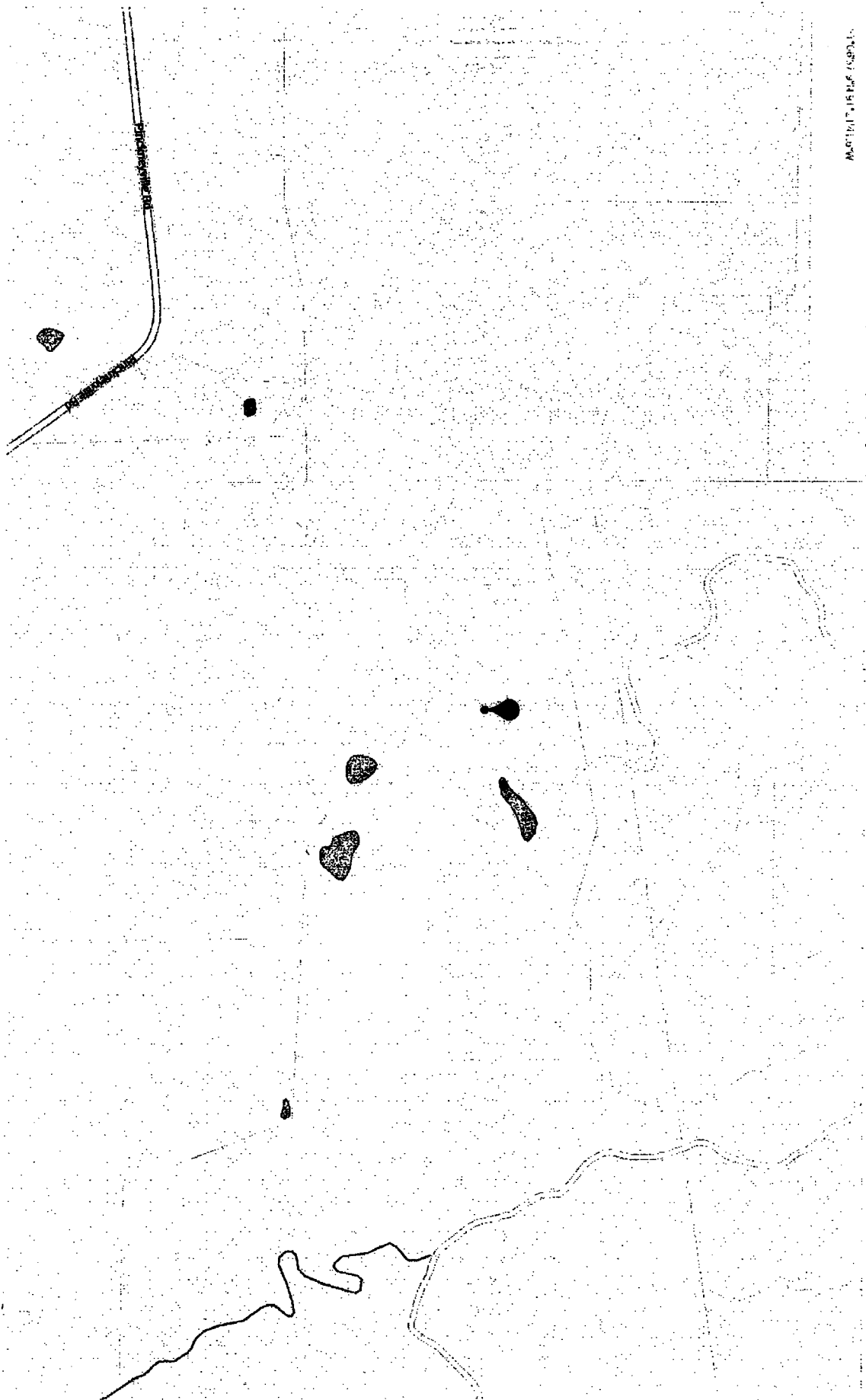
Is This Meter (circle one): New    Repaired    Replacement

*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.

John W Thompson 0-679    12-8-14    John W Thompson  
 Print Name of Pump Installer and License No. (if applicable)    Date    Signature of Pump Installer

31°06'37.9"N 91°21'41.5"W



Map data ©2014 Google 500 ft