

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: N 37
Well #:
L. S. Elevation:
E-log #:

County: Wilkinson
Permit #: 0-586
Driller: JAMES WELLS
Date drilling completed: 1-4-11

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.

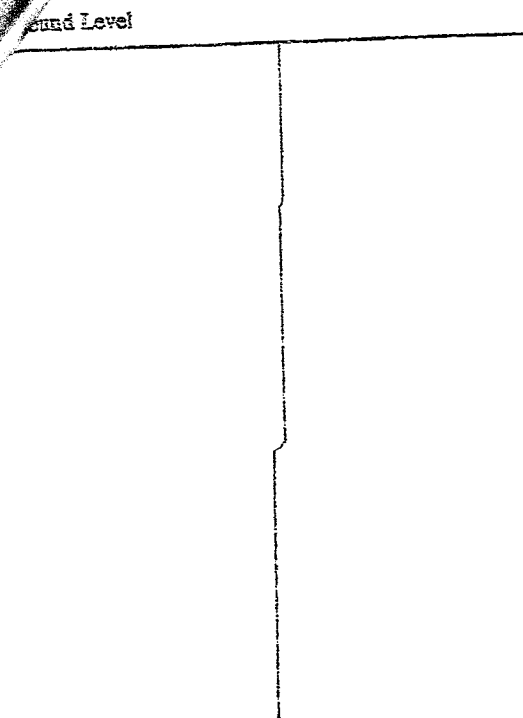
Information on Well Owner (Landowner if borehole is not for a water well)
Owner Name: Clinton Williams
Mailing Address: 1701 Coons Mill Rd.
Centerville MS 39631
Telephone No. (601) 807-1304
Well or Borehole Location
Latitude: 31° 06' 09" Longitude: 91° 12' 48"
Method of Lat/Long (circle one): Conventional Survey
USGS quad, Hand-held GPS, Survey-grade GPS
SE 1/4 SE 1/4 Sec 28 Twn 2N Rng 1W
Distance 7 Miles Direction E of Nearest Town Woodville
Well / Borehole Data
Date drilling started: 1-4-11 Date drilling completed: 1-4-11 Hole depth: 115 Hole diameter: 7 1/2
Location of the source of any surface water used for drilling: running creek
Method of dosing and volume of Chlorine used in drilling and development: shock
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 X 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 X Industrial Public Supply Irrigation Fish Culture Other:
If a flowing well, method of flow regulation: Valve Other (describe)
Static Water Level: 70 feet above of below (circle one) land surface Date measured: 1-4-11
Method of Measurement (circle one) steel tape electric tape air line other:
Well depth: 115 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix
Casing length: 95 feet Casing diameter: 4 inches Type of casing: PVC
Screen length: 20 feet Screen diameter: 4 inches Type of screen: PVC
Screen slot size: .008 inches Setting depth: From 95 feet to 115 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 (04/08)

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telescopes please sketch below and show depths.

N 37



Description of Formations Encountered	From	To
topsoil	0	1
clay	1	60
sand	60	115

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: Clinton Williams

James Wells
 Signature of Water Well Contractor

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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)961-3210
 (601)854-6938 (fax)

For Office Use Only:

Aquifer: _____
 Well #: _____
 Elevation: _____

Day: _____
 Month: _____
 Diller: JAMES WELLS
 Date completed: 1-4-11

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>Clinton Williams</u>	Latitude: _____ Longitude: _____
Mailing Address: <u>1701 Coons Mill Rd.</u>	Method of Lat/Long (circle one): <u>Conventional Survey,</u>
<u>Centerville MS 39631</u>	USGS quad, Hand-held GPS, Survey-grade GPS
City State Zip Code	<u>1/4 Sec 28 Twn 2N Rng 1W</u>
Telephone No. <u>(601) 807-1304</u>	Distance Direction Nearest Town
	<u>7 Miles E of Woodville</u>

Pump Type Circle one	Power Type Circle one
Air Lift <input type="checkbox"/> Jet <input type="checkbox"/> <u>Submersible</u>	Diesel Engine <input type="checkbox"/> Gasoline Engine <input type="checkbox"/> Natural Gas <input type="checkbox"/>
Bucket <input type="checkbox"/> Piston <input type="checkbox"/> Turbine <input type="checkbox"/>	<u>Electric Motor</u> <input type="checkbox"/> Hand <input type="checkbox"/> Tractor PTO <input type="checkbox"/>
Centrifugal <input type="checkbox"/> Rotary <input type="checkbox"/> Flowing Well <input type="checkbox"/>	Windmill <input type="checkbox"/> Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>1</u>
Date Pump Installed: <u>1-4-11</u>	Setting Depth: <u>100</u> feet
Rated Pump Capacity: <u>12</u> Gallons Per Minute	Number of Stages: <u>14</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>1-4-11</u>	Air Line <input type="checkbox"/> Electric Measuring Line <input type="checkbox"/> <u>Steel Tape</u>
Static Water Level (A): <u>70</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>100</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>75</u> Feet Below Land Surface	Well yielded <u>17</u> GPM with a drawdown of
Test Pumping Rate: <u>17</u> Gallons Per Minute	<u>5</u> feet after <u>4</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>4</u> hours	

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

JAMES WELLS 0-586 James Wells
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

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