State Well Report
Part 1

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: Bolivar
Permit #: GW 39748
Driller: Irrigation Equipment
Date drilling completed: 8-3-04

For Office Use Only:
Aquifer:
Well #: A 1011
L. S. Elevation:
E-log #:

OK

State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.

Well Owner Information

Owner Name: Smith Planting
Mailing Address: Box 127
Alligator, MS 38720
City State Zip Code
Telephone No. ( )

Well Location

Latitude: ° ' " Longitude: ° ' "
Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
SE ¼ SW ¼ Sec 19 Twn 26N Rng 6W
Distance 2 Miles Direction NW of Alligator Nearest Town

Well Data

Purpose of Well (circle one) Home Industrial Public Supply (Irrigation) Fish Culture (Other) Replacement

Date well drilling started: 8-3-04 Date well drilling completed: 8-3-04

If flowing, method of flow regulation: Valve _____ Other (describe) _____

Static Water Level: 18 feet above or (below) (circle one) land surface Date measured: 8-3-04

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

Hole depth: 115' Well depth: 115' Well grouted to a depth of 10 feet

Type of grout (circle one): Cement (Bentonite) Mix

Casing length: 75 feet Casing diameter: 12 inches Type of casing: PVC 160

Screen length: 40 feet Screen diameter: 12 inches Type of screen: PVC 160

Screen slot size: .050 inches Setting depth: From See Back 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 back of page

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

Name of organization running log(s): _____

I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

Irrigation Equipment Inc.
Patrick M. Chism 0695

Patrick M Chism

Print Name of Water Well Contractor and License No. Signature of Water Well Contractor

Brought in by Dillard 11-9-04

Customer contracted with Peacock Pump & Repair (Cleveland, MS) for pump installation. Mailed part #2 & part #1 copy 8-9-04.
662-846-0384

DO NOT REMOVE ORIGINALS

RECEIVED
AUG 13 2004
BY: OLWR

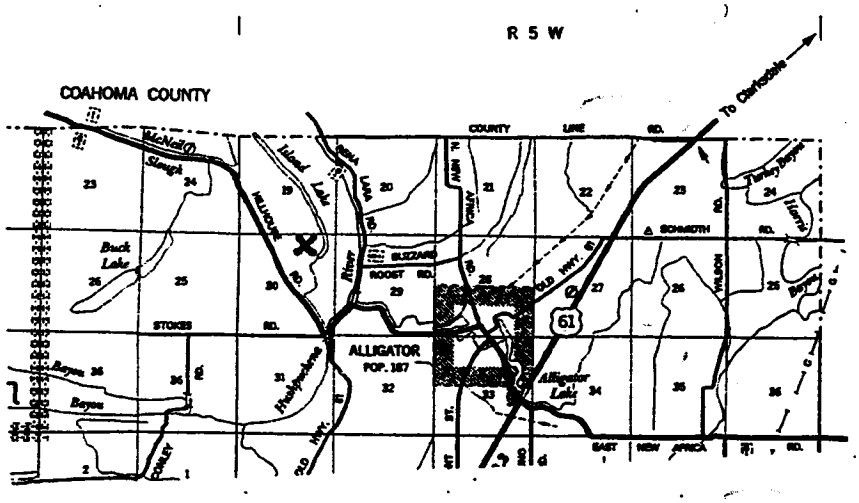
If well telescopes please sketch below and show depths.

Ground Level

Description of Formations Encountered	From	To
Clay	0	18
Fine Sand	19	25
Fine Sand/gravel	26	45
Med. Sand/gravel	46	86
Fine Sand	87	93
Med. Sand/gravel	93	114
Clay	115	
Screen 67-86 20ft.		
Screen 76-115 20ft.		

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: Smith Planting

Patrick M Chism
Signature of Water Well Contractor

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: Bolivar
Permit #: GW 39748
Driller: Irrigation Equipment
Date completed: 8-4-04

For Office Use Only:
Aquifer:
Well #: A101
Elevation:

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

Owner Name: Smith Planting
Mailing Address: Box 127
Alligator, MS 38720
City State Zip Code
Telephone No. ( )

Well Location

Latitude: Longitude:
Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
SE SW ¼ [redacted] ¼ Sec 19 Twn 26N Rng 6W
Distance Direction Nearest Town
2 Miles NW of Alligator

Pump Type
Circle one

Air Lift, Jet, Submersible
Bucket, Piston, (Turbine)
Centrifugal, Rotary, Flowing Well
Other (specify):
Date Pump Installed: 8-4-04
Rated Pump Capacity: [redacted] 3000 Gallons Per Minute

Power Type
Circle one

(Diesel Engine), Gasoline Engine, Natural Gas
Electric Motor, Hand, Tractor PTO
Windmill, Other (specify):
Horse Power Rating of Motor: 100
Setting Depth: 50 feet
Number of Stages: 2

Pump Test Data

Date Well Tested:
Static Water Level (A): Feet Below Land Surface
Pumping Water Level (B): Feet Below Land Surface
Drawdown [(B) – (A)]: Feet Below Land Surface
Test Pumping Rate: Gallons Per Minute
Duration of Pump Test (minimum 4 hours): hours

Method of Measuring Water Level
Circle one

Air Line, Electric Measuring Line, Steel Tape
Other (specify): Cord with weight on it.
For flowing well, measured shut in head: feet
Well yielded GPM with a drawdown of
feet after hours of pumping

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

Peacock's Pump & Repair, Inc.
Print Name of Pump Installer and License No. (if applicable)

Tommy Peacock Sr.
Signature of Pump Installer

RECEIVED
AUG 13 2004
BY: OLWR

B138

2A

County: Bolivar

Permit #: GW 39748

Driller: Irrigation Equipment

Date drilling completed: 8-3-04

State Well Report
Part 1

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)

For Office Use Only:

Aquifer:

Well #: A101

L. S. Elevation:

E-log #:

State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.

Well Owner Information

Owner Name: Smith Planting

Mailing Address: Box 127

Alligator, MS 38720

City State Zip Code

Telephone No. ( )

Well Location

Latitude: ° ' " Longitude: ° ' "

Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS

NW ¼ NE ¼ Sec 30 Twn 26N Rng 5W

Distance 2 Miles Direction NW of Nearest Town Alligator

Well Data

Purpose of Well (circle one) Home Industrial Public Supply (Irrigation) Fish Culture (Other) Replacement

Date well drilling started: 8-3-04 Date well drilling completed: 8-3-04

If flowing, method of flow regulation: Valve Other (describe)

Static Water Level: 18 feet above or (below) (circle one) land surface Date measured: 8-3-04

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

Hole depth: 115' Well depth: 115' Well grouted to a depth of 10 feet

Type of grout (circle one): Cement (Bentonite) Mix

Casing length: 75 feet Casing diameter: 12 inches Type of casing: PVC 160

Screen length: 40 feet Screen diameter: 12 inches Type of screen: PVC 160

Screen slot size: .050 inches Setting depth: From See Back 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 back of page

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

Name of organization running log(s):

I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

Irrigation Equipment Inc.
Patrick M. Chism 0695

Print Name of Water Well Contractor and License No.

Patrick M Chism

Signature of Water Well Contractor

Customer contracted with Peacock Pump & Repair (Cleveland, MS) for pump installation. Mailed part #2 & part #1 copy 8-9-04.
662-846-0384

DO NOT REMOVE ORIGINALS

If well telescopes please sketch below and show depths. GW-39748 A101 2B

Ground Level

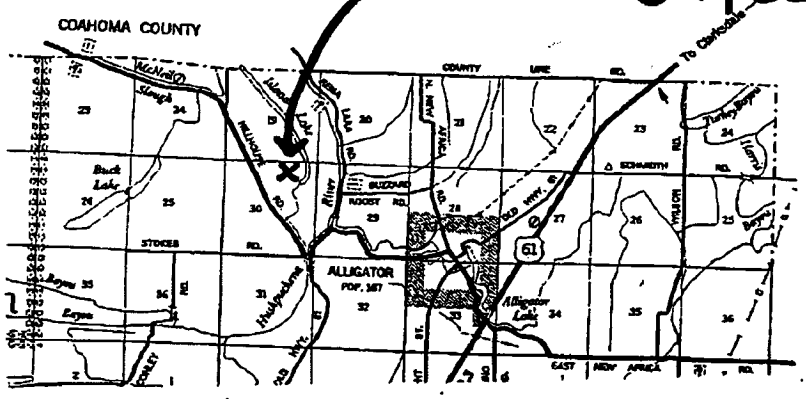
Description of Formations Encountered	From	To
Clay	0	18
Fine Sand	19	25
Fine Sand/gravel	26	45
Med. Sand/gravel	46	86
Fine Sand	87	93
Med. Sand/gravel	93	114
Clay	115	
Screen 67-86 20ft		
Screen 76-115 20ft		

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.

well was in SW/SE 19-26N-R5W

Check with Dillard YMD



Landowner Name: Smith Planting

Patrick M Chism
Signature of Water Well Contractor

DO NOT REMOVE ORIGINALS