

REPLACEMENT WELL

# 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 40310  
 Driller: SIDNEY COOK  
 Date drilling completed: 5/27/05

For Office Use Only:  
 Aquifer: \_\_\_\_\_  
 Well #: C-153  
 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.

<p><b>Well Owner Information</b></p> <p>Owner Name <u>GANT &amp; SONS FARMS JV</u>          Mailing Address: <u>2358 CROSBY ROAD</u>          _____          _____  <u>MERIGOLD</u>                      <u>MS</u>                      <u>38759</u>          City                                      State                      Zip Code</p> <p>Telephone No. ( ) _____</p>	<p><b>Well Location</b></p> <p>Latitude: <u>N 33° 54.059'</u>                      Longitude: <u>W 90° 53.820'</u>          Method of Lat/Long (circle one): <u>Hand-held GPS</u>,          USGS quad, <u>Conventional Survey</u>,  <u>Survey-grade GPS</u></p> <p><u>NE</u> ¼ <u>SE</u> ¼ Sec <u>27</u> Twn <u>24N</u> Rng <u>7W</u>  <u>NW</u>                      <u>NE</u></p> <p>Distance                      Direction                      Nearest Town  <u>4</u> Miles                      <u>ESE</u> of                      <u>GUNNISON</u></p>
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**Well Data**

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

Date well drilling started: 5/27/05                      Date well drilling completed: 5/27/05

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

Static Water Level: 31 feet above or below (circle one) land surface    Date measured: 5/27/05

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

Hole depth: 117    Well depth: 117    Well grouted to a depth of 10 feet

Type of grout (circle one):    Cement    Bentonite    Mix

Casing Length: 77 feet    Casing diameter: 16 inches    Type of casing: PVC

Screen Length: 40 feet    Screen diameter: 16 inches    Type of screen: PVC

Screen slot size: .050 inches    Setting depth: From 0 77 feet to 117 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 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.

Sidney Cook                      #0-289  
Print Name of Water Well Contractor and License No.

Sidney Cook  
Signature of Water Well Contractor

Replaces GW 6652

RECEIVED  
JUN 28 2005  
BY: OLWR



# 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 37350  
 Permit #: 6W 40310  
 Driller: SIDNEY COOK  
 Date completed: 5/28/05

For Office Use Only:

Aquifer: \_\_\_\_\_  
 Well #: C-153  
 Elevation: \_\_\_\_\_

**This report should be prepared by the pump installer in detail and filed with Department within 30 days of the installation of pump.**

Well Owner Information	Well Location
Owner Name <u>GANT &amp; SONS FARMS JV</u>	Latitude: <u>N 33° 54.059'</u> Longitude: <u>W 90° 53.820'</u>
Mailing Address: <u>2358 CROSBY RD</u>	Method of Lat/Long (circle one): <u>Hand-held GPS</u> , Conventional Survey, USGS quad, <u>03</u> Survey-grade GPS <u>49</u>
 	<u>NE</u> ¼ <u>SE</u> ¼ Sec <u>27</u> Twn <u>24N</u> Rng <u>7W</u> <u>SW</u> <u>26</u>
<u>MERIGOLD</u> <u>MS</u> <u>38759</u> City State Zip Code	Distance Direction Nearest Town <u>4</u> Miles <u>ESE</u> of <u>GUNNISON</u>
Telephone No. ( ) _____	

Pump Type Circle one	Power Type Circle one
Air Lift Jet Submersible	<u>Diesel Engine</u> Gasoline Engine Natural Gas
Bucket Piston <u>Turbine</u>	Electric Motor Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>30</u> HP
Date Pump Installed: <u>5/28/05</u>	Setting Depth: <u>60</u> feet
Rated Pump Capacity: <u>1850</u> Gallons Per Minute	Number of Stages: <u>1</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: _____	Air Line Electric Measuring Line <u>Steel Tape</u>
Static Water Level (A): <u>31</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): _____ Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B)-(A)]: _____ Feet Below Land Surface	Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping
Test Pumping Rate: _____ Gallons Per Minute	
Duration of Pump Test (minimum 4 hours): _____ hours	

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

Matt Stephens #0-743P  
 Print Name of Pump Installer and License No. (if applicable)

Matt Stephens  
 Signature of Pump Installer

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