Bòlivar <b>C</b> ounty:	-
Permit#:	_
Date drilling completed: 3-16-05	-

## **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#: 6-206
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 arming of the well.	
Well Owner Information	Well Location
Owner Name	Latitude: 33 . 50 . 23N, Longitude: 90 . 47 .07W,
Mailing Address: Box 406	Method of Lat/Long (circle one): Conventional Survey,
	USGS quad, Nand-held GPS, Survey-grade GPS
Merigold, MS 38759	
City State Zip Code	I NW SE
Telephone No. (662)-723-6174	Distance Direction Nearest Town Merigold
Well	Data
Purpose of Well (circle one) Home Industrial Public Supply	Irrigation Fish Culture Other: Replacement
	well drilling completed: $3-16-05$
If flowing, method of flow regulation: Valve Other (c	-
Static Water Level:feet above or celow (circle one)	land surface Date measured: 3-17-05
Method of Measurement (circle one) seel tape electric tape	air line other:
Hole depth: Well depth:	Well grouted to a depth offeet
Type of grout (circle one): Cement Bentonite Mix	
Casing length: 76 Casing diameter: 16	inches Type of casing: PVC Sch. 40
Screen length: 40 feet Screen diameter: 16	inches Type of screen: PVC Sch.40
Screen slot size: 050 inches Setting depth: From	. 77 feet to 116 feet
Type of completion (circle all applicable): Gravel packed Under	creamed Telescoped Open hole Natural Development
Other (describe):	
Top of lap pipe or reduction in casing:feet. If t	telescoped or more than one screen, describe on back of page
Logs run (circle all applicable): No log run Electric Gamma Ray	y 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 De Irrigation Equipment Inc.	epartment of Health regulations and state laws.
Patrick M. Chism 0695	Patrick M Chin
Print Name of Water Well Contractor and License No.	Signature of Water Well Contractor
inguiscement to a chief	RECEIV

RECEIVED

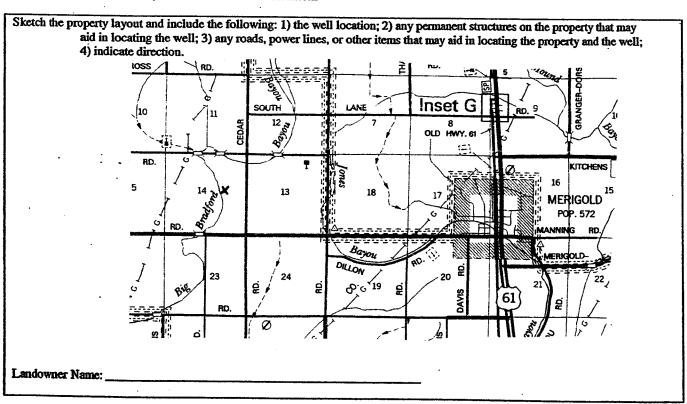
MAR 2 9 2005

BY OLWA

Ground Level

Description of Formations Encountered	From	To
Clay .	10	21
Fine Sand	22	48
Fine Sand/Gravel	49	69
Med. Sand/Gravel	70	116
	1	-
	1	
•		
	1	

If more than one screen, show location of each on sketch



Patub M Chan Signature of Water Well Contractor

## STATE WELL REPORT

## Part 2

County: Bolivar

Permit #:
Irrigation Equipment
Driller: Bolivar

Date completed: 3-17-05

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)

For Office Use Only:
Aquifer:
Well #: 6 - 206
Elevation:

Date completed: 3 – 17 – 05 (601)9		601)961-5210 1)354-6938 (fax)		Elevation:		
installation of num	1D.	y the pump installer in	detail and filed with t			ys of the
We		Well	Location			
Owner Name:	Hawkins	Latitude:	1	Longitude:		
Воз	x 406					
Mailing Address:			Method of Lat/Long (circle one): Conventional Survey,			
			USG	S quad, Hand-l	held GPS, Sur	ey-grade GPS
Me	rigold,	MS 38759	SW. NF	v o - 14	<b>T</b> 23N	Rng 6W
City	Sta	te Zip Code		_ % Sec_1 4	Iwn	Kng ∪ "
0.09	<del></del>		Distance	Direction	Nearest To	vn
Telephone No. ()			3 Miles	West_of	Merigo	1 d
1 oropholic 140.						
	Pump Type	•		Pow	er Type	
	Circle one				cle one	
Air Lift	Jet	Submersible	Diesel Engine	Gasoline	Engine	Natural Gas
Bucket	Piston	Turbine	Electric Motor	Hand		Tractor PTO
Centrifugal	Rotary	Flowing Well	Windmill		pecify):	
Other (specify):			Horse Power Ra	ting of Motor:	50	
Date Pump Installed:	3-17	-05	Setting Depth: _	7(	)	_feet
Rated Pump Capacity: _	2500	Gallons Per Minute	Number of Stage	es:2		<b>-</b>
Pump Test Data			Method of Measuring Water Level Circle one			
Date Well Tested:						- 1-
Static Water I aval (A).	1	Feet Below Land Surface	Air Line	Electric Meast	iring Line	Steel Tape
			Other (specify):			
Pumping Water Level (I	B):F	eet Below Land Surface				
Drawdown [(B) - (A)]:	]	Feet Below Land Surface	For flowing wel	l, measured shu	t in head:	feet
Test Pumping Rate:	· · · · · · · · · · · · · · · · · · ·	Gallons Per Minute	Well yielded		_GPM with a c	rawdown of
Duration of Pump Test (	(minimum 4 ho	urs):hours		feet after	ho	ours of pumping
Patrick M.	Chism (		Patrick	mc	hin	
Print Name of Pump Ins	staller and Licer	se No. (if applicable)	Signatu	re of Pump Inst	taller	

RECEIVED

MAR 2 9 2005

BY: OLWR