County:	Bolivar		
Permit#:	tion	404 Equi	62 pment
Date drilling	completed:	6-2	20-05

## **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:	
Well #: _	6-212
L. S. Ele	vation:
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	Well Location	
Bolivar County School Board	Latitude: 33° 50 '16" Longitude: 90° 49' 48"	
c/o Fioranelli Brothers Mailing Address:	Method of Lat/Long (circle one): Conventional Survey,	
2914 Hwy.8	USGS quad, Hand-held GPS, Survey-grade GPS  SE 1/4 SW 1/4 Sec 16 Twn 23N Rng 6W	
Cleveland, MS 38732	5W	
City State Zip Code	Distance Direction Nearest Town  6 Miles West of Merigold	
Telephone No. (662-843-9488		
Well	Data	
Purpose of Well (circle one) Home Industrial Public Supply		
Date well drilling started: 6-20-05 Date		
If flowing, method of flow regulation: Valve Other (c	1	
Static Water Level: 42 feet above or below (circle one)		
Method of Measurement (circle one) steel tape electric tape	air line other:	
Hole depth: 127' Well depth: 127'	Well grouted to a depth of1 Ofeet	
Type of grout (circle one): Cement Bentonite Mix		
Casing length: 87 feet Casing diameter: 16		
Screen length: 40 feet Screen diameter: 16	inches Type of screen: <u>PVC Sch. 40</u>	
Screen slot size: , 050 inches Setting depth: From		
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.		
	char meetr or treatm references are series and	
Irrigation Equipment Inc. Patrick M. Chism 0695	Hatrib Mchrs	
Print Name of Water Well Contractor and License No.	Signature of Water Well Contractor	

Owner contracted with Peacock Pump & Repair. Peacock Pump & Repair will install pump.

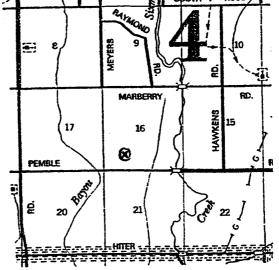
BY JLVAR

Ground Level

Description of Formations Encountered  Clay Fine Sand Med. Sand/gravel	From To    0   15     16   55     56   127

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:	

Signature of Water Well Contractor

## STATE WELL REPORT

## County: Bolivar Permit#: 6 W 40464 Driller: Driller: Pump Installer's Comp Mississippi Department of Em Office of Land and Wa P.O. Box 100 Jackson, MS 3920

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

For Office Use Only:	
Aquifer:	
Well #: <u>G -2/2</u> Elevation:	
LECVAUOII.	

Date completed: (6 20-03	(601)354-6938 (fax) Elevation:	
installation of num n.	ler in detail and filed with the Department within 30 days of the	
Well Owner Information	Well Location	
Bolivar County School Board	3	
Owner Name:	Latitude: Longitude:	
Mailing Address:	Method of Lat/Long (circle one): Conventional Survey,	
P.O. Box 1596		
(1. 1. 1. 466. 2022	USGS quad, Hand-held GPS, Survey-grade GPS	
Cleveland MS 3873 City State Zip Cod	2 SE 1/5 W 1/4 Sec 1/6 Twn 23 R Rng 6 W	
-	Distance Direction Nearest Town	
Telephone No. (662) 843 - 9488	3 Miles NE of Pace	
Pum p Type Circle one	Power Type Circle one	
Air Lift Jet Submersible		
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas	
Bucket Piston Turbine	Electric Motor Hand Tractor PTO	
Centrifugal Rotary Flowing Well	Windmill Other (specify):	
Other (specify):	Horse Power Rating of Motor:	
Date Pump Installed: 6-21-05	Setting Depth:	
Rated Pump Capacity:	1	
Pump Test Data	Method of Measuring Water Level Circle one	
Date Well Tested:		
Static Water Level (A): 42 Feet Below Land Su		
Pumping Water Level (B):Feet Below Land Sur	face Other (specify):	
Drawdown [(B) - (A)]:Feet Below Land Sur	rface For flowing well, measured shut in head:feet	
Test Pumping Rate:Gallons Per Min	nute Well yieldedGPM with a drawdown of	
Duration of Pump Test (minimum 4 hours):he	oursfeet afterhours of pumping	
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.  Part of Pump Helar Inc. 0-1287  Print Name of Pump Installer and License No. (if applicable)  Signature of Fump Installer and License No. (if applicable)		

Signature of Funn Installer

H. 15 2005

BA: Oranga

MULTINE De Communi