

~~Part 1~~ H#H #2

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 #: N147
L. S. Elevation: _____
E-log #: _____

County: BOLIVAR
Permit #: GW-45146
Driller: J. NEWCOME 0.773
Date drilling completed: 55-2011

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
Owner Name: <u>H+H Farms #2</u>	Latitude: <u>33.38.31</u> " Longitude: <u>90.58.49</u> "
Mailing Address: <u>PO Box 118</u>	Method of Lat/Long (circle one): <input type="radio"/> Conventional Survey, <input checked="" type="radio"/> Survey-grade GPS
<u>Benoit MS 38725</u>	USGS quad: <u>SW 1/4 NE 1/4</u> Sec <u>31</u> Twn <u>21N</u> Rng <u>8W</u>
City State Zip Code	Distance <u>2</u> Miles Direction <u>SE</u> of Nearest Town <u>BENOIT</u>
Telephone No. () _____	

Well Data

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

Date well drilling started: 5.5.2011 Date well drilling completed: 5.5.2011

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

Static Water Level: _____ feet above or below (circle one) land surface Date measured: _____

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

Hole depth: 122 Well depth: 120 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 85 feet Casing diameter: 16 inches Type of casing: P.V.C.

Screen length: 35 feet Screen diameter: 16 inches Type of screen: P.V.C.

Screen slot size: .050 inches Setting depth: From 85 feet to 120 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.

JOHN NEWCOME 0.773 _____
Print Name of Water Well Contractor and License No. Signature of Water Well Contractor

Replacement for MS-EW-05800

RECEIVED

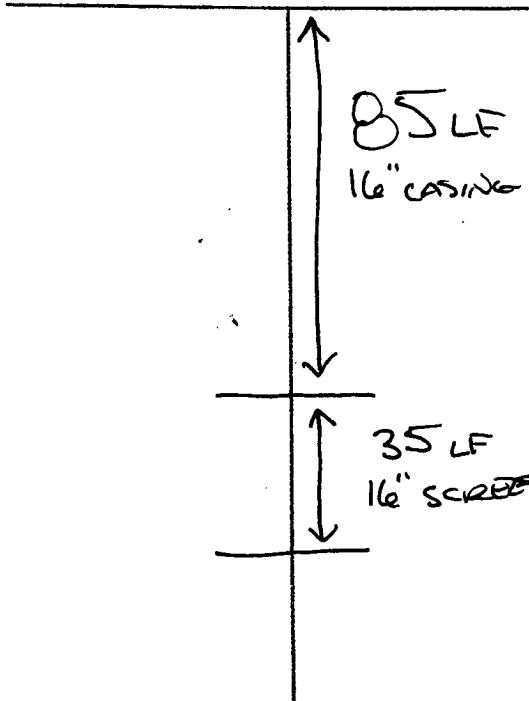
JUN 03 2011

BY: [Signature]

N 147

If well telescopes please sketch below and show depths.

Ground Level



Description of Formations Encountered	From	To
TOP SOIL	0	10
CLAY	10	85
COARSE SAND / FEA GRAVEL	85	120
BOTTOM	120	122

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.

SEE MAP

Landowner Name: _____



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 2309
Jackson, MS 39225
(601)961-5210
(601)961-5228 (fax)

For Office Use Only:

Aquifer: _____
Well #: N147
Elevation: _____

County: Bolivar
Permit #: GW-45146
Driller: J. Newcome 0-773
Date completed: 5/5/11

Copy information from block on Part 1

This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part 1 of the report must be attached and both parts filed with the Department at the above address within 30 days of well completion.

Well Owner Information	Well Location
Owner Name: <u>H+H Farms #2</u>	Latitude: <u>33° 38' 31"</u> Longitude: <u>90° 58' 49"</u>
Mailing Address: <u>PO Box 118</u>	Method of Lat/Long (check one): Conventional Survey _____
<u>Benoit MS 38725</u>	USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
City State Zip Code	<u>NE</u> <u>NW</u> <u>SW</u> <u>SE</u> 1/4 Sec <u>31</u> T <u>21N</u> R <u>8W</u>
Telephone No. () _____	Distance <u>2</u> Miles <u>SE</u> Direction of <u>Benoit</u> Nearest Town

Pump Type	Power Type
Circle one Air Lift Jet <input type="checkbox"/> Submersible <input type="checkbox"/>	Circle one <u>Diesel Engine</u> Gasoline Engine Natural Gas
Bucket Piston <input type="checkbox"/> <u>Turbine</u> <input type="checkbox"/>	Electric Motor Hand Tractor PTO
Centrifugal Rotary <input type="checkbox"/> Flowing Well <input type="checkbox"/>	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>60</u>
Date Pump Installed: <u>5/5/11</u>	Setting Depth: <u>70</u> feet
Rated Pump Capacity: <u>2500</u> Gallons Per Minute	Number of Stages: <u>1</u>

Pump Test Data	Method of Measuring Water Level
Date Well Tested: _____	Circle one Air Line Electric Measuring Line Steel Tape
Static Water Level (A): _____ 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	

This is for (circle one): New Well Replacement of Existing Pump Repair of Existing Pump

RECEIVED

JUN 03 2011

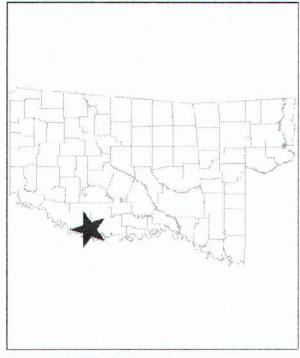
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

Comp Rowe 0-711P
Print Name of Pump Installer and License No. (if applicable)

[Signature]
Signature of Pump Installer

BY: OLWR

Internet Mapping Framework



Legend

- County Boundaries
- MS One Call Natchez Trace Parkway
- MS One Call Interstate Highway
- MS One Call US / State Highway
- MS One Call 3 digit State Highway
- MS One Call County Roads and Streets
- Incorporated Cities
- Other Urban (non-incorporated)
- NHD Other Areas (dbl streams and inun)

adams07_m.sid
alcorn07_m.sid
amite07_m.sid
attala07_m.sid
benton07
bolivar07_m.sid
calhoun07_m.sid
carroll07_m.sid
chickasaw07_m.sid
choctaw07_m.sid
claiborne07_m.sid
clarke07_m.sid
clay07_m.sid
coahoma07_m.sid

Scale: 1:21,281



Map center: 385406, 1427503

This map is a user generated static output from an internet mapping site and is for general reference only. Data layers that appear on this map may or may not be accurate, current, or otherwise reliable. THIS MAP IS NOT TO BE USED FOR NAVIGATION.