

# 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 #: \_\_\_\_\_  
 Driller: COOP Drilling Co.  
 Date drilling completed: 5-28-09

For Office Use Only:

Aquifer: \_\_\_\_\_  
 Well #: P189  
 L. S. Elevator: \_\_\_\_\_  
 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
Owner Name: <u>Redden Farms</u>	Latitude: <u>33° 41' 20"</u> Longitude: <u>90° 48' 26"</u>
Mailing Address: <u>2225 Hwy 446</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>
<u>Boyle</u> MS, <u>38730</u>	USGS quad, Hand-held GPS, Survey-grade GPS
City State Zip Code	<u>S10 14 NW 14 Sec 3 Twn 21 N Rng 6 W</u>
Telephone No: <u>662 846-8226</u>	Distance Direction Nearest Town
	<u>2 Miles S 61 of Skeene MS</u>

**Well Data**

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

Date well drilling started: 5-28-09 Date well drilling completed: 5-28-09

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

Static Water Level: 45 feet above or below (circle one) land surface Date measured: 5-28-09

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

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

Type of grout (circle one): Cement Bentonite Mix

Casing length: 80 feet Casing diameter: 16 inches Type of casing: PVC

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

Screen slot size: 50 inches Setting depth: From 80 feet to 120 feet

Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development  
 Other (describe): \_\_\_\_\_

Top of lap pipe 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 this 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.

Print Name of Well Contractor and License No. COOP Drilling Co. 289

Signature of Water Well Contractor: [Signature]

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Ground level



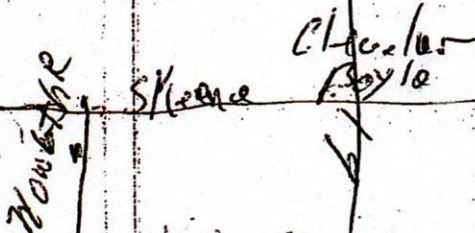
Description of Formations Encountered

From To

Description of Formations Encountered	From	To

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; indicate direction.



Landowner Name: \_\_\_\_\_

Signature: Robert Cook  
Water Well Contractor

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WELL RETURN

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: Bohannon  
 Permit #: \_\_\_\_\_  
 Driller: Cook Drilling Co. Inc.  
 Date completed: 5-28-09

For Office Use Only:  
 Aquifer: \_\_\_\_\_  
 Well #: P189  
 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		Well Location	
Owner Name: <u>Redden James</u>	Latitude: <u>33-41-48</u>	Longitude: <u>90-48-27</u>	
Mailing Address: <u>2225 Hwy 446</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>		
<u>Bayle</u> <u>Ms.</u> <u>38730</u>	USGS quad, Hand-held GPS, Survey-grade GPS		
City State Zip Code	<u>SW 1/4 NW 1/4 Sec 3 Twn 21N Rng 6W</u>		
Telephone No: <u>662, 846-0226</u>	Distance Direction Nearest Town		
	<u>2 Miles SW of Skopje</u>		

Pump Type Circle one	Power Type Circle one
Air Lift Jet <u>Submersible</u>	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: <u>5-28-09</u>	Setting Depth: <u>70</u> feet
Rated Pump Capacity: <u>600</u> Gallons Per Minute	Number of Stages: <u>1</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>5-28-09</u>	Air Line Electric Measuring Line Steel Tape
Static Water Level (A): <u>45</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.

Cook Drilling Co. Inc. 289  
 Print Name of Pump Installer and License No. (if applicable)

[Signature]  
 Signature of Pump Installer

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