

FROM : WATERWEL

FAX NO. : 6018253915

Dec. 05 2005 02:01AM P7

### 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)354-6939 (fax)

For Office Use Only:

Aquifer: \_\_\_\_\_  
Well #: J-84  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: Copiah  
Permit #: \_\_\_\_\_  
Driller: Water Well Service  
Date drilling completed: 10-21-05

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.

<b>Well Owner Information</b> Owner Name: <u>Sanderson Farms</u> Mailing Address: <u>Hwy 28</u> <u>Hazelhurst, MS</u> City State Zip Code Telephone No. <u>(601) 894-3721</u>		<b>Well Location</b> Latitude: <u>31.52.38</u> Longitude: <u>90.22.58</u> Method of Lat/Long (circle one): <input type="radio"/> Conventional Survey. <input type="radio"/> USGS quad. <input type="radio"/> Hand-held GPS. <input type="radio"/> Survey-grade GPS 1/4 Sec <u>34</u> Twn <u>1N</u> Rng <u>2W</u> Distance _____ Miles Direction _____ of <u>Hazelhurst, MS</u>
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**Well Data**

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

Date well drilling started: 7-8-05 Date well drilling completed: 10-21-05

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

Static Water Level: 130 feet above or below (circle one) land surface Date measured: 10-21-05

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

Hole depth: 500 Well depth: 280 Well grouted to a depth of 60 feet

Type of grout (circle one):  Cement  Bentonite  Mix

Casing length: 230 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 50 feet Screen diameter: 4 inches Type of screen: PVC

Screen slot size: 0.08 inches Setting depth: From 230 feet to 280 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): State Logger - J-84

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.

Arnold Fincher Sr 0598

Arnold Fincher Sr  
Signature of Water Well Contractor

Print Name of Water Well Contractor and License No.

Test Well #2  
Test Hole #3

