County: Humphre: OW 40	0130	
Irrigation Equipment Diller:		
Date drilling completed:	4-19-05	

## **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 #: 6-74	
•	
L. S. Elevation:	
E-log #:	

30 days of completion of drilling of the well.	or met in detail and med with the Department within
Well Owner Information	Well Location
Owner Name Peaster Equipment Co.	Latitude: 33. 10,18N., Longitude: 90, 26, 25.W
Mailing Address: Box 1066	Method of Lat/Long (circle one): Conventional Survey,
	USGS quad, Hand-held GPS, Survey-grade GPS
Yazoo City, MS 39194	SW 14 SE 14 Sec 6 Twn 15N Rng 2W
City State Zip Code	Distance Direction Nearest Town
Telephone No. ()	Distance Direction Nearest Town  3 Miles East of Belzoni
Well I	Data
The state of the s	Pivot
·	Irrigation Fish Culture Other:
Date well drilling started: $4-19-05$	well drilling completed: $4-19-05$
If flowing, method of flow regulation: Valve Other (d	escribe)
Static Water Level:feet above or below (circle one) l	and surface Date measured: 4-20-05
Method of Measurement (circle one) seel tape electric tape	air line other:
Hole depth:111' Well depth:111'	
	went grouted to a depth ofreet
Type of grout (circle one): Cement Bentonite Mix	
Casing length: 71 feet Casing diameter: 10	_inches Type of casing:PVC 160
Screen length: 40 feet Screen diameter: 10	inches Type of screen:PVC 160
Screen slot size: . 050 inches Setting depth: From _	. 72feet to111'feet
Type of completion (circle all applicable): Gavel packed Under	reamed Telescoped Open hole Natural Development
Other (describe):	
Top of lap pipe or reduction in casing:feet. If tel	lescoped 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 a	ccordance with all applicable requirements of the Mississippi
Department of Environmental Quality and/or the Mississippi Dep	
Irrigation Equipment Inc. Patrick M. Chism 0695	Data of M. Ch.
Print Name of Water Well Contractor and License No.	Signature of Water Well Contractor

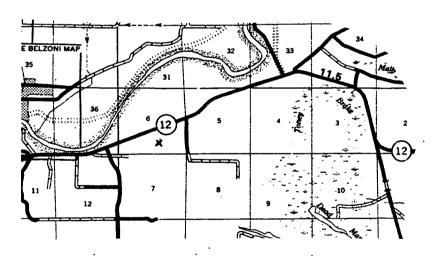
Ground Level

G-74

Description of Formations Enco	ountered From	To ·
Clay		21
Fine Sand	22	45
Fine Sand/gravel	46	55
Med. Sand/gravel	56	1111
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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

## Part 2

County: Humphreys

Permit #: 6 4 40 130

Irrigation Equipment

Driller: 4-20-05

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

For Office Use Only:		
Aquifer:		
Well #: 6-74		
Elevation:		

Driller:  Date completed:	4-20-05	Jackson, 1 (601	MS 39289-0631 1)961-5210 54-6938 (fax)  Well #:	
This report s installation o			ail and filed with the Department within 30 days of t	he
Owner Name:	Peaster Equ	ipment Co.	Latitude: Longitude:	<del></del>
Mailing Address: Box 1066		Method of Lat/Long (circle one): Conventional Survey,		
-			USGS quad, Hand-held GPS, Survey-gr	ade GPS
		MS 39194 Zip Code	SW 14 SE 14 Sec 6 Twn 15N Rng	<u> 2W</u>
	·	•	Distance Direction Nearest Town	
Telephone No. (_	)		3 Miles East of Belzoni	
	Pump Type Circle one		Power Type Circle one	
Air Lift	Jet	Submersible	Diesel Engine Gasoline Engine Na	tural Gas
Bucket	Piston	Turbine	Hectric Motor Hand Tra	ctor PTO
Centrifugal	Rotary	Flowing Well	Windmill Other (specify):	
Other (specify):	····		Horse Power Rating of Motor: 25	····
Date Pump Installe	ed: 4-20-	05	Setting Depth: 60 feet	
Rated Pump Capac	ity: 600	Gallons Per Minute	Number of Stages: 1	
	Pump Test Dat	<b>13</b>	Method of Measuring Water Level Circle one	
Date Well Tested:				
Static Water Level	(A):Fe	et Below Land Surface		d Tape
Pumping Water Le	evel (B):Fe	et Below Land Surface	Other (specify):	<del></del>
Drawdown [(B) - (A)]:Feet Below Land Surface Fo		For flowing well, measured shut in head:	feet	
Test Pumping Rate:Gallons Per Minute W		Well yieldedGPM with a drawdown of		
Duration of Pump Test (minimum 4 hours):hours		feet afterhours of	pumping	
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.  Patrick M. Chism 0695  Print Name of Pump Installer and License No. (if applicable)  Signature of Pump Installer				