

**State Well Report  
Part I**

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: Issaquena  
 Permit #: (GW) 42081  
Irrigation Equipment  
 Driller:  
 Date drilling completed: 8-1-07

For Office Use Only:  
 Aquifer:  
 Well #: A-119 OK  
 L. S. Elevation:  
 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>Carter Brothers</u>	Latitude: <u>32° 86' 15.2"</u> Longitude: <u>90° 55' 35.9"</u>
Mailing Address: <u>P.O. Box 458</u>	Method of Lat/Long (circle one): <u>56 50 36</u> Conventional Survey
<u>Rolling Fork Ms. 39159</u> City State Zip Code	USGS quad, Hand-held GPS, Survey-grade GPS <u>SE 1/4 NW 1/4 Sec 28 Twn 13N Rng 7W</u>
Telephone No. ( )	Distance Direction Nearest Town <u>9 Miles NE of Mayensville</u>

**Well Data**

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

Date well drilling started: 8-1-07 Date well drilling completed: 8-1-07

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

Static Water Level: 19 feet above or below (circle one) land surface Date measured: 8-2-07

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

Hole depth: 125 Well depth: 125 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: PVC

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

Screen slot size: .050 inches Setting depth: From 86 feet to 125 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.

Irrigation Equipment Inc.  
Patrick M. Chism 0695

[Signature]  
Signature of Water Well Contractor

Print Name of Water Well Contractor and License No.

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AUG 13 2007  
BY: OLWR



# STATE WELL REPORT

## 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: Issaquena  
 Permit #: \_\_\_\_\_  
 Driller: Irrigation Equipment  
 Date completed: 8-1-07

For Office Use Only:

Aquifer: \_\_\_\_\_  
 Well #: A-119  
 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.

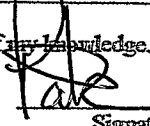
Well Owner Information	Well Location
Owner Name: <u>Carter Brothers</u>	Latitude: _____ Longitude: _____
Mailing Address: <u>P.O. Box 458</u>	Method of Lat/Long (circle one): <input type="checkbox"/> Conventional Survey,
<u>Rolling Fork Ms. 39159</u>	<input type="checkbox"/> USGS quad, Hand-held GPS, Survey-grade GPS
City State Zip Code	<u>SE 1/4 NW 1/4 Sec 28 Twn 13N Rng 7W</u>
Telephone No. ( ) _____	Distance Direction Nearest Town
	<u>9 Miles NE of Mayersville</u>

Pump Type Circle one	Power Type Circle one
Air Lift <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/>	Diesel Engine <input type="checkbox"/> Gasoline Engine <input type="checkbox"/> Natural Gas <input type="checkbox"/>
Bucket <input type="checkbox"/> Piston <input type="checkbox"/> <input checked="" type="checkbox"/> Turbine	<input checked="" type="checkbox"/> Electric Motor <input type="checkbox"/> Hand <input type="checkbox"/> Tractor PTO
Centrifugal <input type="checkbox"/> Rotary <input type="checkbox"/> Flowing Well <input type="checkbox"/>	Windmill <input type="checkbox"/> Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>60</u>
Date Pump Installed: <u>8-2-07</u>	Setting Depth: <u>70</u> feet
Rated Pump Capacity: <u>2800 ±</u> Gallons Per Minute	Number of Stages: <u>1</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: _____	Air Line <input type="checkbox"/> Electric Measuring Line <input type="checkbox"/> Steel Tape <input type="checkbox"/>
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	

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

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BY: OLWR

630 000m

640 000m

650 000m

97° 05'

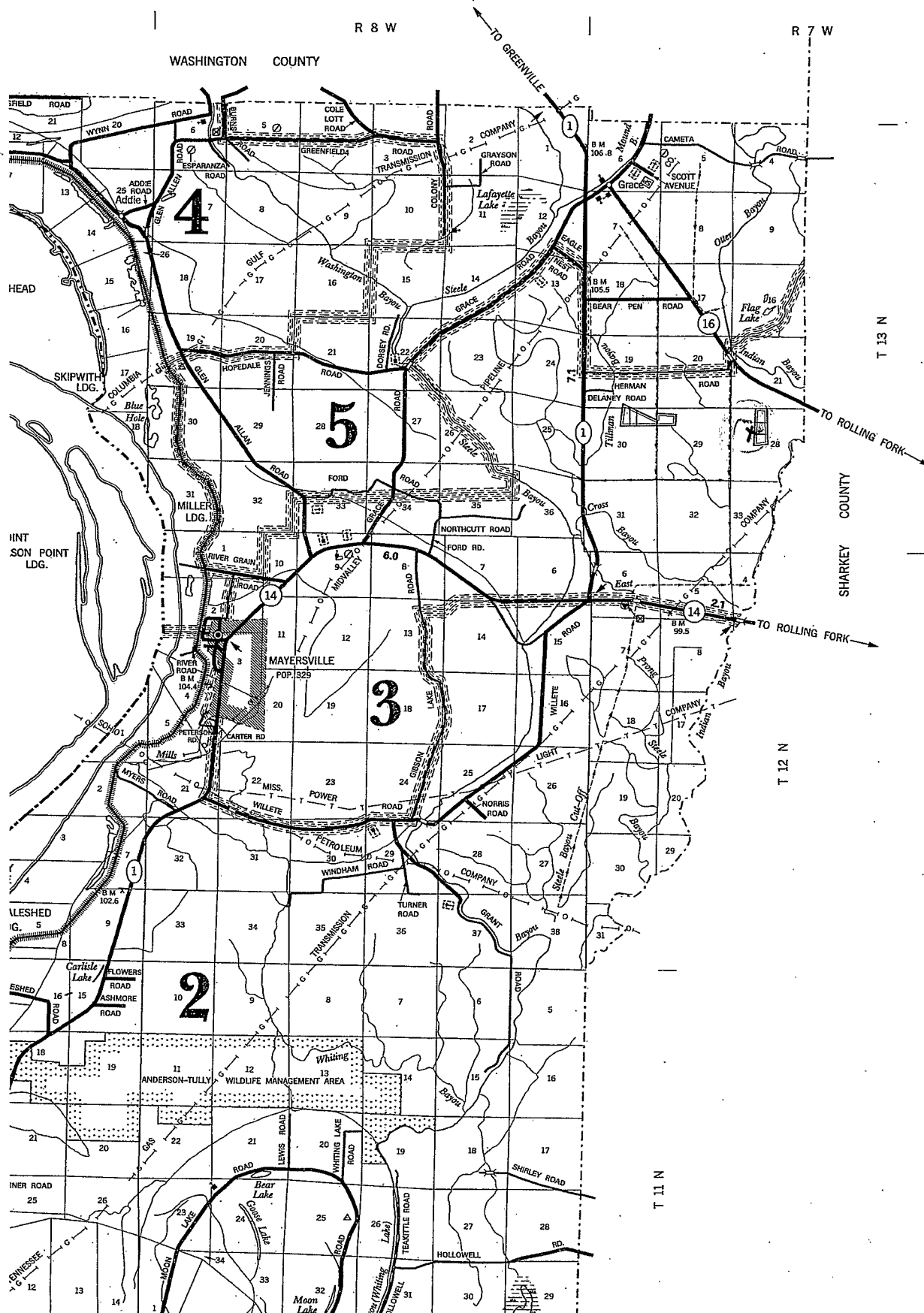
97° 00'

97° 55'

97° 50'

# Carten Brothers Fish Farm Map

# A-119



### ROADS AND ROADWAY FEATURES

- UNIMPROVED ROAD
- GRAVEL
- PAVED ROAD
- UNDIVIDED HIGHWAY
- DIVIDED HIGHWAY
- INTERSTATE SYSTEM
- CITY STREETS

### HIGHWAY BRIDGES

- BRIDGE 50 FEET AND OVER
- DRAWBRIDGE
- FERRY (FREE OR TOLL)
- HIGHWAY GRADE SEPARATION
- HIGHWAY INTERCHANGE

### ROAD SYSTEM DESIGNATION

- INTERSTATE NUMBERED
- U.S. NUMBERED
- STATE NUMBERED

### RAILROADS

- RAILROAD STATION
- GRADE CROSSING
- RAILROAD ABOVE
- RAILROAD BELOW

### AIRPORTS

- MILITARY AIRPORT
- AIRPORT, LIMITED FACILITIES
- LANDING AREA OR STRIP (INCLUDING PRIVATE AIR FIELDS)
- AIRPORT, COMPLETE FACILITIES
- AIRWAY LIGHT BEACON

### DRAINAGE AND NATURAL FEATURES

- NARROW STREAM
- DRAINAGE DITCH
- LAKES AND RESERVOIRS
- OVERFLOW LAND
- MARSH OR SWAMP LAND

### BOUNDARIES

- STATE BOUNDARY
- COUNTY BOUNDARY
- BEAT LINE
- CONGRESSIONAL TOWNSHIP
- SECTION LINE
- NATIONAL OR STATE FOREST
- RESERVATION, PARKS ETC.
- URBAN AREA COMPACT
- INCORPORATED PLACES
- UNINCORPORATED DELIMITED AREAS

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