County:	Leflore		
Permit #: (Irrig Driller:	ation	0497 Equipment	
Date drillir	ng completed:	7-12-05	

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 #: F- 168	
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 Tackett Fish Farm	Latitude:°" Longitude:°"			
Mailing Address: 23939 County Road 523	Method of Lat/Long (circle one): Conventional Survey,			
	USGS quad, Hand-held GPS, Survey-grade GPS			
Schlater, MS 38952 City State Zip Code	NW 1/SE 1/4 Sec 26 Twn 20NRng 2W Distance Direction Nearest Town 6 Miles South of Schlater			
Telephone No. $(\frac{662 - 254 - 7322}{}$				
W.U.	2-4-			
Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other Replacement Date well drilling started: 7-12-05 Date well drilling completed: 7-12-05				
If flowing, method of flow regulation: Valve Other (describe)				
Static Water Level: 51' feet above or below (circle one) land surface Date measured: 7-12-05				
Method of Measurement (circle one) steel tape electric tape air line other:				
Hole depth: 147' Well depth: 147' Well grouted to a depth of 10 feet				
Type of grout (circle one): Cement Bentonite Mix				
Casing length: 87 feet Casing diameter: 16	inches Type of casing: PVC Sch. 40			
Screen length: 60 feet Screen diameter: 16	inches Type of screen: <u>PVC Sch 40</u>			
Screen slot size: <u>. 050</u> inches Setting depth: From _	88 feet to 147 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	Patrik M. Chini			
Print Name of Water Well Contractor and License No.	Signature of Water Well Contractor			

RECEIVED

JUL 28 2005

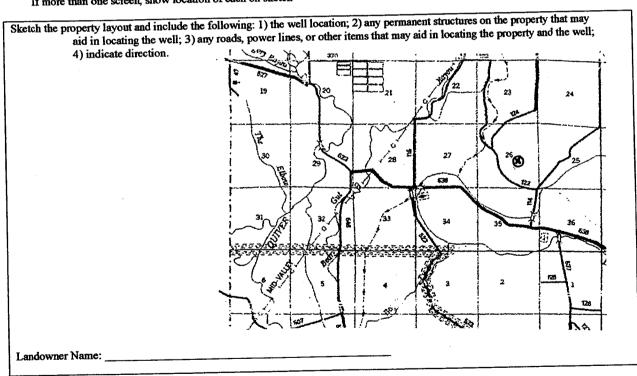
BY: OLWR

If well telescopes please sketch below and show depths.

Ground Level

Description of Formations Encountered	From	To
Clay	0	25
Fine Sand	26	38
Fine Sand/gravel	39	50
	51	61
Med. Sand/gravel	62	74
irine Sand	1/5	80
Med. Sand/gravel	181 -	144
Clay	145	147
		+-
		1
	 	++
		+-+
		+-+
	+	+-+
		+
		+
	+	+-
		1-1
		+
	+	+
	+	1
	1	1
	+	1-

If more than one screen, show location of each on sketch



Signature of Water Well Contractor

STATE WELL REPORT

Part 2

County: Leflore

Pennit#: 6 W 40497

Irrigation Equipment

Duller:

Date completed: 7-12-05

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
(601)354-6938 (fax)

For Office Use Only:		
Aquifer:		
Well#: F-168		
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.

installation of pump.			
Well Owner Information	Well Location		
Owner Name: Tackett Fish Farm	Latitude: Longitude:		
Mailing Address: 23939 County Road 523	Method of Lat/Long (circle one): Conventional Survey,		
	USGS quad, Hand-held GPS, Survey-grade GPS		
Schlater, MS 38952	1414 Sec26 Twn20N Rng_2W		
City State Zip Code	Distance Direction Nearest Town		
662-254-7322 Telephone No. ()	6 Miles South of Schlater		
Pump Type Circle one	Power Type Circle one		
Air Lift Jet Submersible	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: 60		
Date Pump Installed: 7-12-05	Setting Depth: 80 feet		
Rated Pump Capacity: 2500-3000 Gallons Per Minute	Number of Stages:1		
Pump Test Data	Method of Measuring Water Level Circle one		
Date Well Tested:			
Static Water Level (A):Feet Below Land Surface	Air Line Electric Measuring Line Steel Tape		
Pumping Water Level (B):Feet Below Land Surface	Other (specify):		
Drawdown [(B) - (A)]:Feet Below Land Surface	For flowing well, measured shut in head:feet		
Test Pumping Rate:Gallons Per Minute	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	of my knowledge		
Patrick M. Chism 0695 Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer		

RECEIVED

JUL 28 2005

BY: OLWR