KUNTZETA PINOT

State Well Report Part 1 Mississippi Department of Environment

Date drilling completed: 12

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 10631
Jackson, MS 39289-0631

Jackson, MS 39289-0631 (601)961-5210 (601)354-6938 (fax)

For Office Use Only:
Aquifer:
Well #: N-109
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.

30 days of completion of drilling of the well.	
Well Owner Information	Well Location
Owner Name BEAR CREEK Farm PTR	Latitude: 33 · 24 · 473" Longitude 090 · 19 · 473
Mailing Address: C/o EOWIN KUNT	Method of Lat/Long (circle one): Conventional Survey,
Po Box 5A	USGS quad, Hand-held GPS Survey-grade GPS
City State Zip Code	NE 14 SW 14 Sec 20 Twn 18N Rng W
Telephone No. 870) 245 3860	Distance, Direction of Nearest Town South of
Well	Data
	i
Purpose of Well (circle one) Home Industrial Public Supply	
Date well drilling started: 12-29-05 Date	well drilling completed: 12-29-9KD JCHNT WATER
If flowing, method of flow regulation: Valve Other (c	describe) MANAGEMENT DISTRICT
Static Water Level: 22 feet above or below (circle one)	land surface Date measured: 12-29-05
Method of Measurement (circle one) steel tape electric tape	e air line other:
Hole depth: 93 Well depth: 90	_ Well grouted to a depth offeet
Type of grout (circle one): Cement Bentonite Mix	
Casing length: 50 feet Casing diameter: 12	inches Type of casing:PVC
Screen length: 40 feet Screen diameter: 12	inches Type of screen:
Screen slot size:inches	50 feet to 90 feet
Type of completion (circle all applicable): Gravel packed Under	
Other (describe):	
· ·	
Top of lap pipe or reduction in casing:feet. If	telescoped or more man one screen, describe on back or page
Logs run (circle all applicable): No log rup Electric Gamma Ra	y Density Sonic Neutron Other:
Name of organization running log(s):	
	accordance with all applicable requirements of the Mississippi
Department of Environmental Quality and/or the Mississippi D	epartment of Health regulations and state laws.
JOHN NEWWORE 0-773	Al 1),130
Print Name of Water Well Contractor and License No.	Signature of Water Well Contractor
i functianic of water well contractor and License No.	CADIMINA AN III

HOSOS

KUNTZE #2 PINOT

State \	Well Report			
10000	D . 1	For Office Use Only:		
Paris 4 5 7 3 611/408 Onssissippi Departm	Part 1 Shississippi Department of Environmental Quality Office of Land and Water Resources			
Office of Land	Office of Land and Water Resources P.O. Box 10631 Well #: 109			
Jackson.	MS 39289-0631	L. S. Elevation:		
•	1)961-5210			
(601).	354-6938 (fax)	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	Wel	l Location		
Owner Name BEAR CREEK FARM PTR	Latitude: 33 • 24 · 47.	3" Longitude 090 ° 19 ' 473'		
•	method of Lat/Long (circle one): Conventional Survey,			
Po Box 5A		GPS Survey-grade GPS		
City State Zip Code		Twn 18N Rng W		
Telephone No. 870) 245-2900	Distance, Direction South	of ITTA Bena		
We	il Data			
Purpose of Well (circle one) Home Industrial Public Suppl	/ Irrigation Fish Culture	Other:		
Date well drilling started: 12-29-05 Date		ا ا		
If flowing, method of flow regulation: ValveOthe	•			
Static Water Level: 22 feet above or below (circle one) land surface Date measured: 12-29-05				
Method of Measurement (circle one) steel tape electric t	ape air line other:			
Hole depth: 93 Well depth: 90	Well grouted to a depth of	<u>lO</u> feet		
	lix	5.		
Casing length: 50 feet Casing diameter: 12	inches Type of casing:	PVC		
Screen length: 40 feet Screen diameter: 12				
Screen slot size: 50 inches Setting depth: Fro	m 50 feet to 7	90 feet		
Type of completion (circle all applicable): Gravel packed Un	nderreamed Telescoped Ope	n hole Natural Development		
Other (describe): _				
Top of lap pipe or reduction in casing:feet.	If telescoped or more than one so	creen, 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.				
Department of Environmental Quality and/or the Mississippi	Department of Health regulation	is and scare isas.		
1	111.	1		

Print Name of Water Well Contractor and License No.

RECEIVED

Signature of Water Well Contractor

JAN 27 2006

BY: OLWR

If well telescopes please sketch below and show depths.

Ground Level	
12' Screen	12'sing CASING - 50'

Description of Formations Encountered	From	To
1		10
mix Clay	10	20
coarse sand.	20	93
		

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.
	Miss T
N)	Leflore Co 280
	House D
	Landowner Name: EDWIN KUNTZ

Signature of Water Well Contractor