

# 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 #: B-152

L. S. Elevation: \_\_\_\_\_

E-log #: \_\_\_\_\_

County: Pontotoc  
Permit #: \_\_\_\_\_  
Driller: Leeper Drilling  
Date drilling completed: 3-9-07

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

Owner Name: CRAWSON FARMS

Mailing Address: 242 Turnpike Road

PONTOTOC MS  
City State Zip Code

Telephone No. (662) 489-1605

### Well Location

Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_

Method of Lat/Long (circle one): Conventional Survey,

USGS quad, Hand-held GPS, Survey-grade GPS

1/4 1/4 Sec 4 Twn 9S Rng 2E

Distance Direction Nearest Town  
6 Miles NW of PONTOTOC

### Well Data

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

Date well drilling started: 3-8-07 Date well drilling completed: 3-9-07

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

Static Water Level: 65 feet above or below (circle one) land surface Date measured: 3-10-07

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

Hole depth: 280 ft Well depth: 280 ft Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 140 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 40 feet Screen diameter: 2 inches Type of screen: PVC

Screen slot size: 10/10 inches Setting depth: From 240 feet to 250 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.

Leeper Drilling #0079

Print Name of Water Well Contractor and License No.

[Signature]

Signature of Water Well Contractor

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MAR 29 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)

**For Office Use Only:**

Aquifer: \_\_\_\_\_  
 Well #: B-152  
 Elevation: \_\_\_\_\_

County: Pontotoc  
 Permit #: \_\_\_\_\_  
 Driller: Leeper Drilling  
 Date completed: 3-10-07

**This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump.**

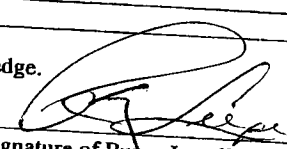
Well Owner Information	Well Location
Owner Name: <u>Crawson Farms</u>	Latitude: _____ Longitude: _____
Mailing Address: <u>242 Turnpike rd</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
<u>Pontotoc</u> <u>MS</u> <u>38863</u>	_____ 1/4 _____ 1/4 Sec <u>4</u> Twn <u>9S</u> Rng <u>2E</u>
City State Zip Code	Distance Direction Nearest Town
Telephone No. ( <del>662</del> ) <u>662</u> <u>489-1605</u>	<u>6</u> Miles <u>NW</u> of <u>Pontotoc</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet <u>Submersible</u>	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston Turbine	<u>Electric Motor</u> Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>3/4 HP</u>
Date Pump Installed: <u>3-10-07</u>	Setting Depth: <u>110</u> feet
Rated Pump Capacity: <u>10</u> Gallons Per Minute	Number of Stages: <u>11</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>3-10-07</u>	Air Line Electric Measuring Line <u>Steel Tape</u>
Static Water Level (A): <u>6.5</u> Feet <u>Below</u> 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.

Leeper Drilling # 0079  
 Print Name of Pump Installer and License No. (if applicable)

  
 Signature of Pump Installer

**RECEIVED**  
 MAR 29 2007  
 BY: OLWR