

# 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-32  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: Quitman  
Permit #: 6640980  
Irrigation Equipment  
Driller: \_\_\_\_\_  
Date drilling completed: 3-30-06

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
Five Star Farms/Carr Place Owner Name _____	Latitude: <u>34° 17' 42.4"</u> Longitude: <u>90° 14' 13.0"</u>
Mailing Address: <u>c/o Midnight Sun</u> <u>Box 98</u> <u>Inverness MS 38753</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
City State Zip Code <u>Inverness MS 38753</u>	NW $\frac{1}{4}$ NW $\frac{1}{4}$ Sec <u>19</u> Twn <u>9S</u> Rng <u>1E</u>
Telephone No. ( <u>662</u> )- <u>265-5209</u>	Distance Direction Nearest Town <u>3</u> Miles <u>NE</u> of <u>Marks</u>

### Well Data

Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other: \_\_\_\_\_  
Date well drilling started: 3-30-06 Date well drilling completed: 3-30-06  
If flowing, method of flow regulation: Valve \_\_\_\_\_ Other (describe) \_\_\_\_\_  
Static Water Level: 16' feet above or below (circle one) land surface Date measured: 4-1-06  
Method of Measurement (circle one) steel tape electric tape air line other: \_\_\_\_\_  
Hole depth: 116 Well depth: 116' Well grouted to a depth of 10 feet  
Type of grout (circle one): Cement Bentonite Mix  
Casing length: 76 feet Casing diameter: 16 inches Type of casing: PVC Sch. 40  
Screen length: 40 feet Screen diameter: 16 inches Type of screen: PVC Sch. 40  
Screen slot size: .050 inches Setting depth: From 77 feet to 116 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

*Patrick M. Chism*

Print Name of Water Well Contractor and License No.

Signature of Water Well Contractor

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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: Quitman  
 Permit #: GW 40980  
 Irrigation Equipment  
 Driller: \_\_\_\_\_  
 Date completed: 3-30-06  
*Copy information from block on Part 1*

For Office Use Only:

Aquifer: \_\_\_\_\_  
 Well #: F32  
 Elevation: \_\_\_\_\_

*This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part 1 of the report must be attached and both parts filed with the Department at the above address within 30 days of well completion.*

**Well Owner Information**

Five Star Farms/Carr Place  
 Owner Name: \_\_\_\_\_  
 Mailing Address: c/o Midnight Sun  
Box 98  
Inverness, MS 38753  
 City State Zip Code  
662-265-5209  
 Telephone No. ( ) \_\_\_\_\_

**Well Location**

Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_  
 Method of Lat/Long (check one): Conventional Survey \_\_\_\_\_  
 USGS quad \_\_\_\_\_ Hand-held GPS \_\_\_\_\_ Survey-grade GPS \_\_\_\_\_  
NW ¼ NW ¼ Sec 19 T 9S R 1E  
 Distance Direction Nearest Town  
3 Miles NE of Marks

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**APR 14 2006**  
**BY: OLWR**

**Pump Type**  
Circle one

Air Lift      Jet      Submersible  
 Bucket      Piston      Turbine  
 Centrifugal      Rotary      Flowing Well  
 Other (specify): \_\_\_\_\_  
 Date Pump Installed: 4-1-06  
 Rated Pump Capacity: 2500-3000 Gallons Per Minute

**Power Type**  
Circle one

Diesel Engine      Gasoline Engine      Natural Gas  
 Electric Motor      Hand      Tractor PTO  
 Windmill      Other (specify): \_\_\_\_\_  
 Horse Power Rating of Motor: 60  
 Setting Depth: 70 feet  
 Number of Stages: 1

**Pump Test Data**

Date Well Tested: \_\_\_\_\_  
 Static Water Level (A): \_\_\_\_\_ Feet Below Land Surface  
 Pumping Water Level (B): \_\_\_\_\_ Feet Below Land Surface  
 Drawdown [(B) - (A)]: \_\_\_\_\_ Feet Below Land Surface  
 Test Pumping Rate: \_\_\_\_\_ Gallons Per Minute  
 Duration of Pump Test (minimum 4 hours): \_\_\_\_\_ hours

**Method of Measuring Water Level**  
Circle one

Air Line      Electric Measuring Line      Steel Tape  
 Other (specify): \_\_\_\_\_  
 For flowing well, measured shut in head: \_\_\_\_\_ feet  
 Well yielded \_\_\_\_\_ GPM with a drawdown of  
 \_\_\_\_\_ feet after \_\_\_\_\_ hours 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)      Patrick M. Chism  
 Signature of Pump Installer