County:	Sharkey				
Permit #:	GW-47558	<u> </u>			
Driller:	Irrigation Equipment				
Date drilling completed: 07/06/2013					

STATE WELL REPORT Part 1

Part 1
Driller's Log
Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225-2309
(601) 961-5210
(601) 360-0535 (fax)

For Office Use Only:				
Well#:	<u> </u>			
Aquifer:				
E-Log #:				

	cense holder responsible for the work and filed with the				
Department at the above address within 30 days of completion of drilling of the well or borehole. Well Owner Information (Landowner if borehole is not for a water well) Well or Borehole Location					
Owner Name: Caselli and Caselli	Latitude: 33 00' 11.4 N Longitude: 90 51' 56.5 W				
Mailing Address: 373 Sago Road	Method of Lat/Long (check one):				
	☐ USGS quad, ☑ Hand-held GPS, ☐ Survey-grade GPS				
Nitta Yuma Ms 38721 City State Zip code	<u>SW</u> 1/4 NE 1/4, Sec 1 T 13 N R 7 W				
Telephone No. () -	1 Miles Southwest of Nitta Yuma (Distance) (Direction) (Nearest Town)				
Weil / Bo	rehole Data				
Date drilling started: 07/06/2013 Date drilling completed:	07/06/2013 Hole depth: 125 Hole diameter: 24"				
Location of the source of any surface water used for drilling:	Surface Water				
Method of dosing and volume of Chlorine used in drilling and dev	relopment: 50 PPM				
Logs run (check all applicable): ⊠ No log run ☐ Electric ☐ Gam	nma Ray 🔲 Density 🗎 Sonic 🗎 Neutron 🗍 Other:				
Name of organization running log(s):					
Purpose of borehole (check one): Water Well Geotech	hnical/Geological Investigation				
☐ Seismic Survey	Other (describe)				
If drilling is not related to water well con	nstruction, skip the remainder of this block				
Purpose of Well <i>(check all applicable)</i> : ☐ Home ☐ Industrial ☐ F	Public Supply ☑ Irrigation ☐ Fish Culture				
Other (describe):					
If a flowing well, method of flow regulation: Valve	Marcon Command and contract				
Static Water Level: 29' feet [□ above or ⊠ belo (check one)	ow] land surface Date measured: 07/08/2013				
Method of Measurement (check one) ☑ Steel tape ☐ Electric tap	pe Air line Other: (describe)				
Well depth: 125 Well grouted to a depth of: 10 fee	t Type of grout (check one): ☐ Neat 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 <u>86</u> feet to <u>125</u> feet				
Type of completion (check all applicable): 🛭 Gravel packed 🗌 U	and the second of the second o				
Other (describe):					
Top of lap pipe or reduction in casing: Feet	B. Same man Court of the Court				
If telescoped or more than on	ne screen, describe on next page Form: OLWR-SWR-1A (4/13)				

Jept of Environmental Quality

County: Sharkey Permit #: GW-47558			For Office Use (-
The sketch below only required f		Description of formations encou and boreholes, unless specifical		II wells
Ground level ———		Description of Formations End		To (depth)
Glouila level		Clay	Ground level	29
		Fine Sand	30	49
		Fine Sand & Gravel	50	66
		Medium Sand & Grave	l 67	125
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				<u> </u>
				1
If more than one screen, show	v location of each on sketch		_	<u>. </u>
Sketch the property layout 1) the well location 2) any permanent stru 3) any roads, power li 4) a north arrow	uctures on the property that may	y aid in locating the well d in locating the property and the	well	
			Company of the compan	
				11115
Landowner Name:C	aselli and Caselli			
requirements of the Missis	sippi Department of Environme	onstructed, and complete in according all a control of the complete in a control of the control	ordance with all applicable	ons,
if applicable, and state law Patrick Chism	s. 0695	08/29/2013		
	e Licensee and License No.	Date	Signature of Licensee	

Signature of Licensee Form: OLWR-SWR-1A (4/13)

County:	Sharkey			
Permit #:	GW-47558			
Driller: Irrigation Equipment				
Date drilling completed: 07/06/2013				
Copy information from block on Part 1				

Patrick Chism

0695

Print Name of Pump Installer and License No. (if applicable)

STATE WELL REPORT

Part 2

Pump Installer's Completion Report Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 2309 Jackson, MS 39225-2309

(601) 961-5210 (601) 360-0535 (fax)

For Office Use Only:				
Well#:	<u> </u>			
Aquifer:				

This part of the report must of the report must be attache	be completed by o ed and both parts	a licensed water w filed with the Dep	ell contractor artment at th	r or a licens e above add	ed pump i tress with	installer. A co in 30 days of	opy of Part 1 well completion.
	ner Information					Location	<u>-</u> .
Owner Name: Caselli and	Caselli		Latitude:	33 00' 11	I.4 N	_ Longitude:	90 51' 56.5 W
Mailing Address: 373 Sago	Road		Method o	f Lat/Long (check on	e): 🔲 Con	ventional Survey,
			USGS	quad, 🛭 H	land-held	GPS, 🔲 Su	vey-grade GPS
Nitta Yuma City	Ms State	38721 Zip code	SW 1/4 NE 1/4, Sec 1 T 13 N R 7 W				R <u>7 W</u>
Telephone No. ()		Zip Code	1	S[= Miles		vest of	Nitta Yuma
relephone No		•	(Distar		(Directi		(Nearest Town)
		Pump Ty	pe (check on	e)			
☐ Submersible ☑ Turbine ☐	Air Lift ☐ Centri				Rotary 🗆	Other (descr	ibe):
Date Pump Installed 07/08		-			•		Gallons Per Minute
Is This Pump (check one):							
	•	Power Ty	pe (check or	ie)			
☐ Electric ☑ Diesel ☐ Gasol	ine 🗌 Natural G	as 🗆 Tractor PTC) ☐ Windmill	☐ Other (d	lescribe):		
Horse Power Rating of Motor:	60	_ Setting Depth:	70		feet Nu	mber of Stag	es: <u>1</u>
		Pump Test Data	for Non Flo	wing Well			
Date Well Tested:			Duration (of Pump Te	st (minim	um 4 hours):	Hours
Static Water Level (A):				Water Leve	el (B):	Fe	et Below Land Surface
Drawdown [(B) - (A)]:	Feet	t Below Land Surf	ace Test F	umping Ra	te:		_ Gallons Per Minute
Method of measurement (che	ck one): 🔲 Steel	tape 🗆 Electric t	ape 🗆 Air lìn	e 🛘 Other	(describe)):	
		Pump Test Da	ta for Flowii	ng Well			
Measured shut in head:	Fee	et					
Well yielded	GPM with a draw	wdown of		feet after		ho	urs of pumping
		Meter	Installation				
Meter Manufacturer: None	Installed		Meter	Serial Num	ber:		
Meter Model Number/Name:			Туре	e of Meter:			
Totalizer Register Unit and Mu	ultiplier Factor (A	F x .001, gal x 10	00, etc):				
Installation Date:	Mete	er installed by:					
Is This Meter (check one):	New ☐ Repaire	d Replacemen	t				
Important: By submitting		mation you are ce l wells, a list of ap					cturer standards.
I HEREBY CERTIFY that the	above statemen	ts are true to the	oest of my kr	owledge.	$\overline{\Gamma}$		

08/29/2013

Date

Signature of Pump Installer Form: OLWR-SWR-1B (4/13)