

# 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)

County: Sunflower  
Permit #: \_\_\_\_\_  
Irrigation Equipment  
Driller: \_\_\_\_\_  
Date drilling completed: 4/24/09

For Office Use Only:  
Aquifer: \_\_\_\_\_  
Well #: B-118  
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 <u>Legg Farms II</u>   | Latitude: _____ Longitude: _____  |
| Mailing Address: <u>203 Hwy 32</u>  | Method of Lat/Long (circle one): Conventional Survey,<br>USGS quad, Hand-held GPS, Survey-grade GPS |
| <u>Drew</u> <u>Ms.</u> <u>38737</u>   | <u>SE 1/4 NE 1/4</u> Sec <u>24</u> Twn <u>24N</u> Rng <u>3W</u>                                     |
| City State Zip Code   | Distance Direction Nearest Town<br><u>2</u> Miles <u>SE</u> of <u>Rome</u>                          |
| Telephone No. ( ) _____   |   |
| Well Data <u>Old well 16" steel 20' North</u>   |   |
| Purpose of Well (circle one) Home Industrial Public Supply <u>Irrigation</u> Fish Culture <u>Other</u> <u>Replacement</u>   |   |
| Date well drilling started: <u>4/24/09</u> Date well drilling completed: <u>4/24/09</u>   |   |
| If flowing, method of flow regulation: Valve _____ Other (describe) _____   |   |
| Static Water Level: <u>39</u> feet above of <u>below</u> (circle one) land surface Date measured: <u>4/25/09</u>  |   |
| Method of Measurement (circle one) <u>steel tape</u> electric tape air line other: _____  |   |
| Hole depth: <u>127</u> Well depth: <u>127</u> Well grouted to a depth of <u>10</u> feet   |   |
| Type of grout (circle one): Cement <u>Bentonite</u> Mix   |   |
| Casing length: <u>87</u> feet Casing diameter: <u>16</u> inches Type of casing: <u>PVC</u>  |   |
| Screen length: <u>40</u> feet Screen diameter: <u>16</u> inches Type of screen: <u>PVC</u>  |   |
| Screen slot size: <u>.050</u> inches Setting depth: From <u>88</u> feet to <u>127</u> feet  |   |
| Type of completion (circle all applicable): <u>Gravel packed</u> Underreamed Telescoped Open hole Natural Development<br>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) <u>No log run</u> 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.<br>John P. Chism 0439   |   |
| Print Name of Water Well Contractor and License No.   | <u>John P. Chism</u><br>Signature of Water Well Contractor  |

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B-118

If well telescopes please sketch below and show depths.

Ground Level

| Description of Formations Encountered | From | To  |
|---------------------------------------|------|-----|
| Clay                                  | 0    | 24  |
| Fine Sand                             | 25   | 40  |
| Fine Sand + Gravel                    | 41   | 60  |
| Medium Sand                           | 61   | 65  |
| Medium Sand + Gravel                  | 66   | 127 |
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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.

Landowner Name: Legg Farms II

John P. Chmi  
 Signature of Water Well Contractor

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# 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: Sanflower  
 Permit #: \_\_\_\_\_  
**Irrigation Equipment**  
 Driller: \_\_\_\_\_  
 Date completed: 4/24/09

For Office Use Only:

Aquifer: \_\_\_\_\_  
 Well #: B-118  
 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.


| Well Owner Information   | Well Location   |
|--|---|
| Owner Name: <u>Legg Farms II</u><br>Mailing Address: <u>203 Hwy 32</u><br><br><u>Drew Ms. 38737</u><br><small>City State Zip Code</small><br><br>Telephone No. ( ) _____ | Latitude: _____ Longitude: _____<br>Method of Lat/Long (circle one): <u>Conventional Survey</u> ,<br>USGS quad, Hand-held GPS, Survey-grade GPS<br><u>SE 1/4 NE 1/4 Sec 24 Twn 24N Rng 3W</u><br>Distance Direction Nearest Town<br><u>2 Miles SE of Rome</u> |

| Pump Type<br>Circle one  | Power Type<br>Circle one  |
|--|---|
| Air Lift      Jet      Submersible<br>Bucket      Piston <u>Turbine</u><br>Centrifugal      Rotary      Flowing Well<br>Other (specify): _____ | <u>Diesel Engine</u> Gasoline Engine      Natural Gas<br>Electric Motor      Hand      Tractor PTO<br>Windmill      Other (specify): _____<br>Horse Power Rating of Motor: <u>60</u><br>Setting Depth: <u>70</u> feet<br>Number of Stages: <u>1</u> |
| Date Pump Installed: <u>4/25/09</u><br>Rated Pump Capacity: <u>2800<sup>±</sup></u> Gallons Per Minute   |   |

| Pump Test Data   | Method of Measuring Water Level<br>Circle one  |
|--|--|
| Date Well Tested: _____<br>Static Water Level (A): _____ Feet Below Land Surface<br>Pumping Water Level (B): _____ Feet Below Land Surface<br>Drawdown [(B) - (A)]: _____ Feet Below Land Surface<br>Test Pumping Rate: _____ Gallons Per Minute<br>Duration of Pump Test (minimum 4 hours): _____ hours | Air Line      Electric Measuring Line      Steel Tape<br>Other (specify): _____<br>For flowing well, measured shut in head: _____ feet<br>Well yielded _____ GPM with a drawdown of<br>_____ feet after _____ hours of pumping |

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

John P. Chism      0439  
 Print Name of Pump Installer and License No. (if applicable)

  
 Signature of Pump Installer

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R 4 W

R 3 W

COAHOMA

COUNTY

# Legg Farms II Map

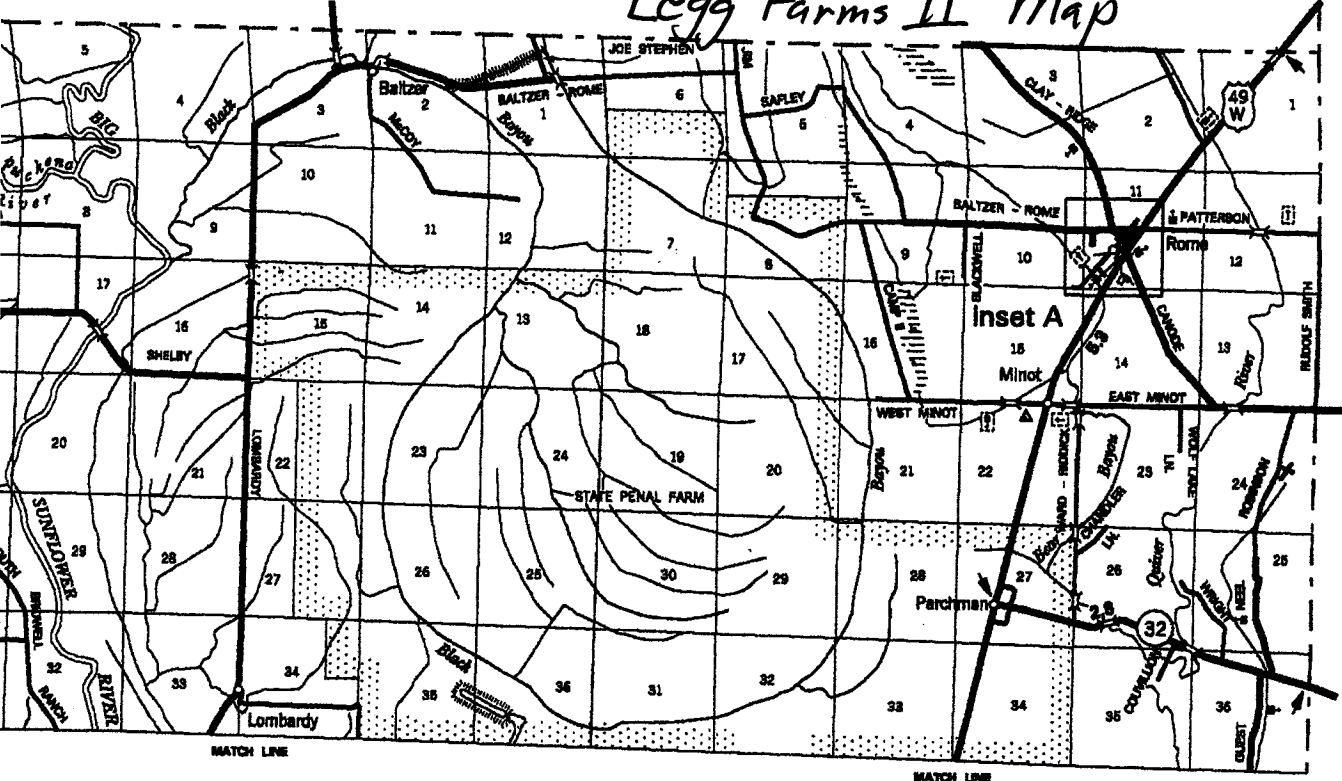
B-118



TALLAHATCHIE COUNTY

T 24 N

480 000 m



R 4 W

R 3 W

90° 35'

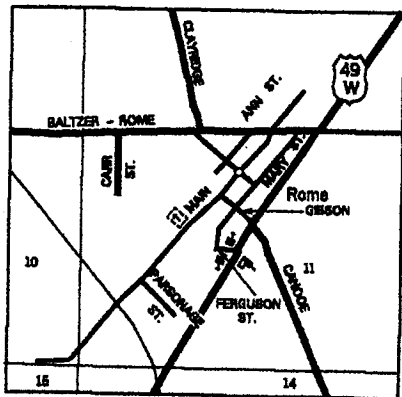
90° 30'

680 000 m

690 000 m

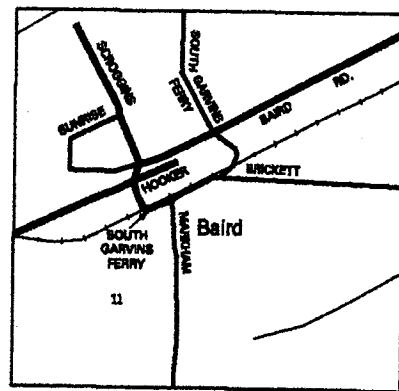
- LUSK C4
- LYON BRIDGE D3
- M.C. GUTTMAN A5
- MADDOEN D4
- MAIN B5
- MAJON E5
- MALLETT - JONES C4
- MAMIE LEE F4
- MARSHAM B2,F5
- MARY ST. B2
- MARSHALL F5
- MCCARTY C5
- MCCONKLE C5
- MADDY F5
- MADANIELS A5
- MENITYRE C5
- MITCHELL C4,D4
- MIXON C4
- MOLL B4
- MORRHEAD - BELZONI F5
- MOUND G4
- MOUND FISH POND G4
- MOUNT GALLESE C5
- MULLIN E5
- MURTAGH SHEFFIELD E5
- MUSZ C5
- MYERS G4
- NASH E5
- NEEL ROBINSON A5
- NOEL C4
- NORTH AIRPORT B5
- NORTH BARNETT B5
- NORTH BIRDWELL RANCH A1
- NORTH NOBLE E4
- NORTH SWANSON E5
- NORTH WADE SCHOOL A5
- O.W. BAYVEL A4
- OSBORN RD. E4
- PARKER F5
- PANORAMA B4
- PAT SHEFFIELD F5
- PANORAMA ST. B2
- PATTERSON A5
- PETE KING LN. G4
- PINKY SHEPHERD D5,B5
- PITMAN DOOD D5,B5
- POLLOCK F4
- POND EXT. C5
- POPCORN G4
- POVERTY LN. B4
- POWELL B5,D4
- PRATT PLACE G4
- PRINCE LANE B5
- QUICK E5
- RADIO - STATION B4
- RALPH RAY B4
- RASH B5
- RATLISHANE C5
- REED A5
- REED 1,2,3,4,5,6,7,8,9,10,11,12,13,14,15,16,17,18,19,20,21,22,23,24,25,26,27,28,29,30,31,32,33,34,35,36,37,38,39,40,41,42,43,44,45,46,47,48,49,50,51,52,53,54,55,56,57,58,59,60,61,62,63,64,65,66,67,68,69,70,71,72,73,74,75,76,77,78,79,80,81,82,83,84,85,86,87,88,89,90,91,92,93,94,95,96,97,98,99,100

- SOUTH WADE E5
- SOUTHSIDE G4
- STAGGS C4
- STANSEL B5
- STEED - MIXON D4
- STERLIMAN D5
- STEPHEN - LYON C5
- STEWART B4
- STINSON SA,F4
- STRINGELLOW B4
- SUNFLOWER - ITTA BEMA E5
- SUNFLOWER E4
- SURINEZ B2
- SWANGO F5
- SWOPE B5
- TAYLOR C4
- TERRELL C5
- THARP A4
- THOMAS GOODIN B4
- THOMPSON F4
- THREE MILE LAKE F5,G5
- TINDALL F5
- TOLER BROWN G5
- TOMMY BARD G4
- TRANSPERRY F5
- TRAMER B5
- TROTTER C4,D4
- TURNER B4
- TV STATION F5
- TWINER B5,C5
- VALLEY E5
- W. D. KIRK BLAINE D4
- WACO G5
- WADDELL E5
- WADE SCHOOL A5
- WALKER C4
- WALTONIA LN. B4
- WARD - RODDICK A5
- WATKINS F5
- WATSON A5,E4
- WASHINGTON F5
- WELSH F5
- WEST CALE G4
- WEST GRESHAM E5
- WEST MINOT A5
- WEST PAXTON G4
- WEST SKEN D5
- WHITTINGTON RD. F4,G4
- WILLIE MARTIN G4
- WILLINGHAM A4
- WYBLE B5
- WOLF LAKE LN. A5
- WOODBURN F5
- WOODS D4
- WRIGHT A5



Inset A

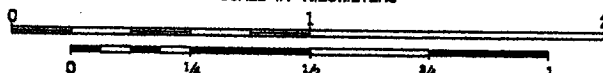
T 24 N R 3 W



Inset B

T 18 N R 4 W

SCALE IN KILOMETERS



SCALE FOR ENLARGEMENTS IN MILES

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