

33-41-36 90-28-24

**MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY**

Office of Land and Water Resources

<b>COUNTY WELL LOCATED</b> <b>Sunflower</b>	
<b>WELL NUMBER</b> H-136	<b>CODED</b>
<b>DATE WELL COMPLETED</b> 5-2-03	

<b>PERMIT NUMBER</b>
<b>NAME OF DRILLING FIRM</b> Irrigation Equipment Inc.
Indianola, MS

P. O. Box 10631  
Jackson, MS 39289-0631  
**WATER WELL DRILLERS LOG**

<b>NAME &amp; MAILING ADDRESS OF LANDOWNER</b> Connell Farms 514 Pecan St. Ruleville, MS 38771			
<b>Latitude:</b>		<b>Longitude:</b>	
<b>WELL LOCATION</b> NW/NE 14 21N S 3W W	<b>SEC</b>	<b>TOWNSHIP</b>	<b>RANGE</b>
<b>DISTANCE</b>	<b>DIRECTION</b>		<b>NEAREST TOWN</b>
Miles	SE		Ruleville
<b>OTHER LANDMARK</b>			
<b>WELL PURPOSE:</b> Home, Irrigation, Municipal, Industrial, Fish Pond, etc. Irrigation			

<b>PUMP DATA</b>			
<b>PUMP TYPE (Circle One):</b> <u>Submersible</u> , Turbine, Jet, Flowing Well, Other (Describe) _____			
<b>POWER TYPE (Circle One):</b> <u>Electric</u> , Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P <u>25</u>			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Clay	0	21
Fine Sand	21	35
Fine Sand/gravel	35	45
Med. Sand/gravel	45	125

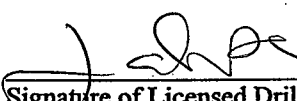
**RECEIVED**  
**MAY 13 2003**  
**BY: OLWR**

<b>WELL DATA</b>		
<b>Well Depth</b> 125	<b>Casing Diameter (In.)</b> 10	<b>Casing Length (Ft.)</b> 85
<b>Type of Casing</b> pvc	<b>Hole Depth</b> 125	<b>Depth to Static Water Level</b> 42ft.
<b>TYPE OF COMPLETION: (Circle One or More):</b> <u>Gravel Packed</u> , Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) _____		
<b>WELL GROUTED TO A DEPTH OF</b> 10 <b>FEET</b> Type Grout (circle one): Cement, <u>Bentonite</u> , or Mix		

<b>SCREEN DATA</b>		
<b>Diameter - Inches</b> 10	<b>Length - Feet</b> 40	<b>Slot Size - Inches</b> .050
<b>Screen Type</b> pvc	<b>Depth to Bottom - Feet</b> 125	

<b>Top of Lap Pipe or Reduction in Casing</b>	
<b>FEET</b>	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

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.

 0439 \_\_\_\_\_  
Signature of Licensed Driller and License No. Date

5-10-03

**Additional Information Required On Back**

If well telescopes please sketch and show depths.

GROUND LEVEL

		X	

SECTION 14

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
1200	1	70 FT.

PUMP TEST

Well yielded \_\_\_\_\_ GPM with  
a drawdown of \_\_\_\_\_ ft.  
after \_\_\_\_\_ hours of pumping

**LOG DATA**

TYPE OF LOG RUN (Circle One): No Log Run, Electric, Gamma Ray, Density, Sonic, Neutron, Other (Describe) \_\_\_\_\_

Name of Organization Running Log \_\_\_\_\_

**GEOLOGIC DATA (Office Use Only)**

Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test

Driller's Remarks

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If more than one screen, show location of each on sketch.