State Well Report				
County: Suntlower Part 1-1	Driller's Log	For Office Use Only:		
Mississippi Departme	nt of Environmental Quality	Aquifer:		
Tana i and a di Lailu s	and Water Resources Box 2309	Well#:		
Jackso	n, MS 39225			
	961- 5210 81- 5228 (fax)	L. S. Elevation:		
		E-log#:		
State Law requires that this report be prepared by the lie	cense holder responsible for	the work and filed with the		
Department at the above address within 30 days of com Information on Well Owner	pletion of drilling of the well	or borehole.		
(Landowner if borehole is not for a water well)	_	orehole Location		
Owner Name Pitts Farms	Latitude: 33 • 3-2 50-3	" Longitude: <u>90 • 42 ·23.8"</u>		
Mailing Address: BOX 925	Method of Lat/Long (circle o	ne): Conventional Survey,		
		GPS, Survey-grade GPS		
Indianola MS 38751	N 12 4 5W 4 Sec 27	Twn 20 N Rng 5W		
City State Zip Code	Distance Direction	Nearest Town of Indianala		
Telephone No. ()	Miles _/V W	of <u>Indianola</u>		
Well / Ror	chole Data			
Date drilling started: $5-14-11$ Date drilling completed: $5-14$	// Hole depth: / 47	Hole diameter: 24"		
Location of the source of any surface water used for drilling:  Method of dosing and volume of Chlorine used in drilling and deve	Surface Water elopment: 50 PPM			
Logs run (circle all applicable) No log run Electric Gamma Ray Name of organization running log(s):	y Density Sonic Neutron	Other:		
Purpose of borehole (check one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump				
Seismic Survey Other (describe)				
If drilling is not related to water well construction, skip the remainder of this block				
Purpose of Well (check one): Home Industrial Public Supply Irrigation Fish Culture Other:				
If a flowing well, method of flow regulation: Valve Other (describe)				
Static Water Level: 42 feet above of below (circle one) land surface Date measured: 5-25-11				
Method of Measurement (circle one) steel tape electric tape air line other:				
Well depth: 149 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix				
Casing length: 89 feet Casing diameter: 16 inches Type of casing: PVC				
Screen length: 60 feet Screen diameter: 16 inches Type of screen: PVC				
Screen slot size:				
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development				

Other (describe):

Top of lap pipe or reduction in casing:

Form: OLWR-SWR-1A (04/08)

feet. If telescoped or more than one screen, describe on next page



From (depth) To (depth)

JUN 0 1 2011

<u>Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations</u>

**Description of Formations Encountered** 

Form: OLWR-SWR-1A (04/08) tify that the well/borehole was drilled, constructed, and completed in accordance with all applicable requirements of the issippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state Patrick M. Chism 0695		Fine Sand 23	el フフ
If more than one screen, show location of each on sketch  th 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) a north arrow.  From: OLWR-SWR-1A (04/08) iffy that the well/borehole was drilled, constructed, and completed in accordance with all applicable requirements of the saippi Department of Environmental Quality and the Mississippi Department of Hesithyregolations, if applicable, and state Patrick M. Chism 0695		Fine Sand 23	
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The sketch below only required for water wells

If well telescopes, show depths on sketch.

Ground Level.....

County: San Flower	STATE WELL REPORT Part 2		For Office Use Only:
Permit#: GW 45071 Irrigation Equipment	Pump Installer's Completion Report		Aquifer:
Driller:	Office of Land and Water Resources P.O. Box 2309		Well#:
Date completed: 5-/4-//	Jackson, MS 39225 (601)961-5210		Elevation:
Copy information from block on Part 1  This part of the report must be completed	].	1-5228 (fax)	netallar A com of Part 1 of the
report must be attached and both parts fil	ed with the Department a	t the above address within 30 d	ays of well completion.
Well Owner Information		Wel	l Location
Owner Name: Pitts Farr	ns	Latitude: 33 32-50	Longitude: 16 42 24
Mailing Address: Box 925	<del></del>	Method of Lat/Long (check or	ne): Conventional Survey,
		USGS quad, Hand-held	GPS Survey-grade GPS
	MS 38751	14 1V 14 5 VV 14 Sec -	27 T20N R SW
City State Telephone No. ()	Zip Code	Distance Direction  Miles // O	Nearest Town

	Pump Typ Circle one			Power Type Circle one	
Air Lift	Jet	Submersible	Diesel Engine	Gasoline Engine	Natural Gas
Bucket	Piston	Turbine	Electric Motor	Hand	Tractor PTO
Centrifugal	Rotary	Flowing Well	Windmill	Other (specify):	
Other (specify):			Horse Power Ratin	ng of Motor:	3D
Date Pump Installe	xd: 5-2	5-11	Setting Depth:	80	feet
Rated Pump Capac	city: 2500.	Gallons Per Minute	Number of Stages:		

Date Well Tested:	test Data		Circle one	Level
Static Water Level (A):  Pumping Water Level (B):		Air Line Other (specif	Electric Measuring Line	Steel Tape
Drawdown [(B) – (A)]:	Feet Below Land Surface	For flowing v	well, measured shut in head:	feet
Test Pumping Rate:	Gallons Per Minute	Well yielded	GPM with a	drawdown of
Duration of Pump Test (minimum	a 4 hours): hours		feet afterh	nours of pumping

This is for (circle one):	New Well	Replacement of Existing Pump	Repair of Existing Pump

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

Patrick M. Chism 0695

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

Signature of Pump Installer Form: OLWR-SWR-1C 00 000