	State We	ell Report			
County: Sunflower		riller's Log	For Office Use Only:		
Permit #: 6 W-44/66	Mississippi Department	of Environmental Quality	Aquifer: 136		
Irrigation Equipment	Office of Land and	d Water Resources ox 2309	Well #:		
		MS 39225	Well #.		
Date drilling completed: 4-14-10	, ,	51- 5210	L. S. Elevation:		
	(601)961-	· 5228 (fax)	E-log #:		
State Law requires that this repor	t be prepared by the licer	nse holder responsible for t	he work and filed with the		
Department at the above address Information on Well (within 30 days of comple	etion of drilling of the well	or borehole.		
(Landowner if borehole is not for	or a water well)	_	rehole Location		
Owner Name Walter P	itte	Latitude: <u>33 ° 32 '58, 6</u>	" Longitude: 90 · 33 · 568;		
Mailing Address: P.O. Box 9		Method of Lat/Long (circle on	e): Conventional Survey,		
Walling Address. 7.0. Doc	~	USGS quad. (Hand-held	GPS Survey-grade GPS		
			V _{Twn} 20N Rng 4W		
Indianola 1 City, 62-887- Telephone No. (662-887-	Mr. 38751		- · · · · · · · · · · · · · · · · · · ·		
City, Stat	e Zip Code	Distance Direction Miles NW	Nearest Town		
Telephone No. () 2-88/-	4551	T_miles _/vw_	or suntiquer		
44 4	Well / Boreho				
Date drilling started: 4-14-10 Date dri	lling completed: 4/4//	<u>U</u> Hole depth: <u>//7</u>	Hole diameter: 24"		
Location of the source of any surface water	r used for drilling: Su	ırface Water			
Method of dosing and volume of Chlorine	used in drilling and develor	pment: 50 PPM			
Logs run (circle all applicable) No log run Name of organization running log(s):	Electric Gamma Ray	Density Sonic Neutron	Other:		
Purpose of borehole (check one): Water W	ell Ceotechnical/Geolog	gical Investigation Ground	Source Heat Pump		
Seismic S	SurveyOther (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: Valye Other (describe)					
Static Water Level: 43 feet above on below circle one) land surface Date measured: 4-15-10					
Method of Measurement (circle one) steel tape electric tape air line other:					
Well depth: 117 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix					
Casing length: 77 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 78 feet to 1/7 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 teles	scoped or more than one scree	n, describe on next page		

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

The sketch	helaw	only	required	for	water wells

Print Name of Responsible Licensee and License No.

If well telescopes, show depths on sketch.

Ground Level.

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

Ground Level	Description of Formations Encountered	From (depth)	To (depth
	Clay	Ground Level	27
	Brown Sand	28	57
	Fine Sand	58	67
	Medium Sanda Gravel	68	87
	Course Sand + Grave	88	111
	Clay		117
·			
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		· · · · · · · · · · · · · · · · · · ·	
1		-	
•			
ndowner Name: Walter Pitts	Form:	OLWR-SWR-1A	(04/08)
tify that the well/borehole was drilled, constructed, and co sissippi Department of Environmental Quality and the Mis	mpleted in accordance with all applicable re		

Date

Signature of Licensee

C CI	STATE WELL REPORT		For Office Hee Only		
county: Sunflower		Part 2	For Office Use Only:		
Permit#: 6-W-44/66 Irrigation Equipment	Pump Installer	r's Completion Report	Aquifer: (12/		
Irrigation Equipment	Mississippi Departme	ent of Environmental Quality	- TIU		
Driller:		and Water Resources	Well #:		
Date completed: 4-14-10		D. Box 2309 on, MS 39225	· · · · · · · · · · · · · · · · · · ·		
Daw completed		1)961-5210	Elevation:		
Copy information from block on Part 1		61-5228 (fax)			
This and Cal					
This part of the report must be completed	by a licensed water well	l contractor or a licensed pump in	staller. A copy of Part 1 of the		
report must be attached and both parts file Well Owner Informat	ea wiin ine Department	at the above address within 30 da	ys of well completion.		
		Well	Location		
Owner Name: Walter Pi	775	Latitude:	Longitude:		
Mailing Address: P.O. Box 9					
Mailing Address: P. U. B by 1	4	Method of Lat/Long (check one): Conventional Survey			
			USGS quad, Hand-held GPS, Survey-grade GPS		
7 1. 1 10.	20-	j .			
Indianola M City State	<u>s. 5875</u> /	NE & SW & Sec -	25 T20N R 4W		
City State	Zip Code				
		Distance Direction Miles NW of	Nearest Town		
Telephone No. ()		Miles NW of	Juntlower		
<u> </u>					
Pump Type		n.	75		
Circle one			ver Type rcle one		
Air Lift Jet	Submersible	1	Engine Natural Gas		
Bucket Piston	T. 13	1	namai Vas		
Bucket Piston	Turbine	Electric Motor Hand	Tractor PTO		
Centrifugal Rotary	Flowing Well	Windmill Other (s	:6.).		
			pecify):		
Other (specify):		Horse Power Rating of Motor:	15		
11 15-10					
		Setting Depth:	feet		
Rated Pump Capacity: 2800 ±	Gallons Per Minute	Number of Stages:	2		
		ramoor or stages.			
Pump Test Data		Method of Mea	suring Water Level		
Date Well Tested:		Cir	cle one		
Static Water Level (A):Feet I	Below Land Surface	Air Line Electric Meass	uring Line Steel Tape		
		Other (specify):			
Pumping Water Level (B):Feet B	elow Land Surface	Carot (Specify).			
i					
Drawdown [(B) - (A)]:Feet F	selow Land Surface	For flowing well, measured shu	t in head:feet		
Test Pumping Rate:	Gallons Per Minute	Well violded	CDM mid - 1		
		Well yielded	OFM With a drawdown of		
Duration of Pump Test (minimum 4 hours):	hours	feet after	hours of pumping		
			omo or pumping		
This is for (circle one): New Well Replacement of Existing Pump Repair of Existing Pump					
This is for (circle one): New Well Replacement of Existing Pump Repair of Existing Pump					
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.					
Patrick M. Chism 0695					
Private CP V III					
Form: OLWR-SWR-1C (07-09)					