

County: Sunflower  
 Permit #: GW-45186  
 Irrigation Equipment  
 Driller:  
 Date drilling completed: 6-3-11

**State Well Report**  
**Part 1 - Driller's Log**  
 Mississippi Department of Environmental Quality  
 Office of Land and Water Resources  
 P.O. Box 2309  
 Jackson, MS 39225  
 (601)961-5210  
 (601)961-5228 (fax)

**For Office Use Only:**  
 Aquifer: 0220  
 Well #: \_\_\_\_\_  
 L. S. Elevation: \_\_\_\_\_  
 E-log #: \_\_\_\_\_

*State Law requires that this report be prepared by the license 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.*

<b>Information on Well Owner</b> (Landowner if borehole is not for a water well) Owner Name <u>Fitts, Fitts, &amp; Pate</u> Mailing Address: <u>10 Paul Fitts Lane</u> <u>Moorehead</u> <u>Ms.</u> <u>38761</u> City State Zip Code Telephone No. ( ) _____		<b>Well or Borehole Location</b> Latitude: <u>33 29 42.7N</u> Longitude: <u>90° 30 04.7</u> Method of Lat/Long (circle one): Conventional Survey, <input checked="" type="checkbox"/> USGS quad, <input checked="" type="checkbox"/> Hand-held GPS, <input checked="" type="checkbox"/> Survey-grade GPS NW <input checked="" type="checkbox"/> SW <input checked="" type="checkbox"/> Sec <u>22</u> Twn <u>19N</u> Rng <u>3W</u> Distance <u>3</u> Miles Direction <u>N</u> of Nearest Town <u>Moorehead</u>
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**Well / Borehole Data**

Date drilling started: 6-3-11 Date drilling completed: 6-3-11 Hole depth: 127 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 development: 50 PPM

Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: \_\_\_\_\_

Name of organization running log(s): \_\_\_\_\_

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: 52 feet above or below (circle one) land surface Date measured: 6-4-11

Method of Measurement (circle one) steel tape electric tape air line other: \_\_\_\_\_

Well depth: 127 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 87 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 88 feet to 127 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 telescoped or more than one screen, describe on next page*

### Ground Level

[illegible]

**Landowner Name:**

Fitts, Fitts, & Pate

**I certify that the well/borehole was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state laws.**

Patrick M. Chism 0695

**Print Name of Responsible Licensee and License No.****Date****Signature of Licensee**

County: Sunflower  
Permit #: GW-45186  
Irrigation Equipment  
Driller: \_\_\_\_\_  
Date completed: 6-3-11  
Copy information from block on Part 1

## 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  
(601)961-5210  
(601)961-5228 (fax)

#### For Office Use Only:

Aquifer: \_\_\_\_\_

Well #: 0220

Elevation: \_\_\_\_\_

*This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part 1 of the report must be attached and both parts filed with the Department at the above address within 30 days of well completion.*

#### Well Owner Information

Owner Name: Fitts, Fitts, & Pate  
Mailing Address: 10 Paul Fitts Lane  
Moorehead Ms. 38761  
City State Zip Code  
Telephone No. ( ) \_\_\_\_\_

#### Well Location

Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_  
Method of Lat/Long (check one): Conventional Survey \_\_\_\_\_  
USGS quad \_\_\_\_\_, Hand-held GPS \_\_\_\_\_, Survey-grade GPS \_\_\_\_\_  
NW ☐ SW ☐ Sec 22 T 19N R 3W  
Distance 3 Miles Direction N of Nearest Town Moorehead

Pump Type  
Circle one  
Air Lift Jet Submersible  
Bucket Piston Turbine  
Centrifugal Rotary Flowing Well  
Other (specify): \_\_\_\_\_  
Date Pump Installed: 6-4-11  
Rated Pump Capacity: 2300 ± Gallons Per Minute

Power Type  
Circle one  
Diesel Engine Gasoline Engine Natural Gas  
Electric Motor Hand Tractor PTO  
Windmill Other (specify): \_\_\_\_\_  
Horse Power Rating of Motor: 60  
Setting Depth: 80 feet  
Number of Stages: 2

Pump Test Data  
Date Well Tested: \_\_\_\_\_  
Static Water Level (A): \_\_\_\_\_ Feet Below Land Surface  
Pumping Water Level (B): \_\_\_\_\_ Feet Below Land Surface  
Drawdown [(B) - (A)]: \_\_\_\_\_ Feet Below Land Surface  
Test Pumping Rate: \_\_\_\_\_ Gallons Per Minute  
Duration of Pump Test (minimum 4 hours): \_\_\_\_\_ hours

Method of Measuring Water Level  
Circle one  
Air Line Electric Measuring Line Steel Tape  
Other (specify): \_\_\_\_\_  
For flowing well, measured shut in head: \_\_\_\_\_ feet  
Well yielded \_\_\_\_\_ GPM with a drawdown of  
\_\_\_\_\_ feet after \_\_\_\_\_ hours of pumping

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

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

Signature of Pump Installer

Form: OLWR-SWR-1C (07-09)