

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Office of Land and Water Resources

COUNTY WELL LOCATED
Sunflower

WELL NUMBER
RC-198

CODED

PERMIT NUMBER

DATE WELL COMPLETED
3-26-01

NAME OF DRILLING FIRM
Irrigation Equipment Inc.

Indianola, MS

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

NAME & MAILING ADDRESS OF LANDOWNER
HopeSo Farms

1200 Montgomery Drive
Inverness, MS 38753

Latitude:
Longitude:

WELL LOCATION. SEC TOWNSHIP RANGE
ne/se 17 18N N 3W E W

DISTANCE DIRECTION NEAREST TOWN
2 SW Moorhead
Miles of

OTHER LANDMARK

WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.
Irrigation

PUMP DATA

PUMP TYPE (Circle One):
Submersible, Turbine, Jet, Flowing Well,
Other (Describe)

POWER TYPE (Circle One):
Electric, Tractor, Diesel, Gasoline, Butane,
Other (Describe) **H/P 25**

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Clay	0	15
Brown Sand	15	35
Fine Sand	35	55
Med. Sand	55	75
Med. Sand/gravel	75	85
Coarse Sand/gravel	85	107

WELL DATA

Well Depth Casing Diameter (In.) Casing Length (Ft.)
117 10 77

Type of Casing Hole Depth Depth to Static Water Level
pvc 117 39ft.

TYPE OF COMPLETION: (Circle One or More):
Gravel Packed, Underreamed, Telescoped,
Natural Development, Open Hole, Other
(Describe)

WELL GROUTED TO A DEPTH OF _____ FEET
Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

Diameter - Inches Length - Feet Slot Size - Inches
10 40 .050

Screen Type Depth to Bottom - Feet
pvc 117

RECEIVED
AUG 15 2001

Dept. of Environmental Quality
Office of Land & Water Resources

Top of Lap Pipe or Reduction in Casing

FEET 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.


Signature of Licensed Driller and License No.

0-439

8-13-01

Date

If well telescopes please sketch and show depths.

GROUND LEVEL

SECTION 17

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

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