G 61	
County: Sunflo	wer
Permit#: <u>6U</u> Irrigation Driller:	<i>40758</i> Equipment
Date drilling completed:	11-10-05

State Well Report

Part 1

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 10631
Jackson, MS 39289-0631
(601)961-5210
(601)354-6938 (fax)

For Office Use Only:	
Aquifer: _	
Well #:	T- 121
L. S. Elev	ration:
E-log#:	

State Law requires that this report be prepared by the driller in detail and filed with the Department within

30 days of completion of drilling of the well.	Well Location
Well Owner Information	
Owner Name_ Kansas Planting	Latitude: 33 ° 50 · 20 · 20 · 20 · 20 · 20 · 20 · 20 ·
Mailing Address: 65 Holly Ridge Road	Method of Lat/Long (circle one): Conventional Survey,
	USGS quad, Hand-held GPS, Survey-grade GPS
Indianala MC 20751	SW 1/4 SE 1/4 Sec 6 Twn 17N Rng 4W
Indianola, MS 38751 City State Zip Code	Distance Direction Nearest Town
Telephone No. (62-887-3821	4 Miles West of Inverness
Well	Data
Purpose of Well (circle one) Home Industrial Public Supply	Irrigation Fish Culture Other Replacement
	well drilling completed: 11-10-05
If flowing, method of flow regulation: Valve Other (c	describe)
Static Water Level:32 'feet above or below (circle one) land surface Date measured:11-17-05	
Method of Measurement (circle one) steel tape electric tape	
Hole depth: Well depth: Well grouted to a depth of feet	
Type of grout (circle one): Cement Bentonite Mix	
Casing length: 71 feet Casing diameter: 16 inches Type of casing: PVC Sch. 40	
Screen length: 40 feet Screen diameter: 16	inches Type of screen:PVC_Sch_40
Screen slot size:	72 feet to 111 feet
Type of completion (circle all applicable): Gravel packed Under	
Other (describe):	
Top of lap pipe or reduction in casing: feet. If telescoped or more than one screen, describe on back of page	
Logs run (circle all applicable): No log run Electric Gamma Ra	y Density Sonic Neutron Other:
Name of organization running log(s): I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi	
I certify that the well was drilled, constructed, and completed in accordance with an appetitude of the Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.	
	Character of Transfer of The
Irrigation Equipment Inc. Patrick M. Chism 0695	Patrick M Chisa
Print Name of Water Well Contractor and License No.	Signature of Water Well Contractor

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If well telescopes please sketch below and show depths.

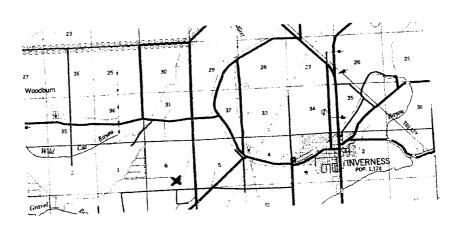
Ground Level

Description of Formations Encountered	From	То
Clav	0	20
Fine Sand	21	45
Fine Sand/gravel	46	60
Med. Sand/gravel	60	711
	<u> </u>	
	<u> </u>	igsqcup
		$oxed{L}$
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	1	
	1	

Time

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

Sketch 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) indicate direction.



Old well is on south side of new well.

Landowner Name:	
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Signature of Water Well Contractor

STATE WELL REPORT

Sunflower County: Permit #: Irrigation Equipment Inc. Date completed: __11-17-05

Part 2 **Pump Installer's Completion Report** Mississippi Department of Environmental Quality Office of Land and Water Resources

P.O. Box 10631 Jackson, MS 39289-0631 (601)961-5210 (601)354-6938 (fax)

For Office Use Only:	
Aquifer:	
Well #:	T-121
Elevation:	

	
This report should be prepared by the pump installer in de installation of pump.	-
Well Owner Information	Well Location
Owner Name: Kansas Planting	Latitude:Longitude:
Mailing Address:	Method of Lat/Long (circle one): Conventional Survey,
	USGS quad, Hand-held GPS, Survey-grade GPS
Indianola MS 38751	¼¼ Sec6 Twn_ 17N Rng4W
Indianola MS 38751 City State Zip Code	Distance Direction Nearest Town
662-887-3821	
Telephone No. ()	4 Miles West of Inverness
Pump Type Circle one	Power Type Circle one
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston Turbine	Rectric Motor Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify):
Other (specify):	Horse Power Rating of Motor: 60
Date Pump Installed: 11-17-05	Setting Depth: 60 feet
Rated Pump Capacity: 2200 Gallons Per Minute	Number of Stages:
Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested:	
Static Water Level (A):Feet Below Land Surface	
Pumping Water Level (B): Feet Below Land Surface	Other (specify):
· · · · · · · · · · · · · · · · · · ·	For Chaming well an annual short in boards
Drawdown [(B) - (A)]:Feet Below Land Surface	For flowing well, measured shut in head:feet
Test Pumping Rate: Gallons Per Minute	Well yieldedGPM with a drawdown of
	feet after hours of pumping
Duration of Pump Test (minimum 4 hours):hours	feet after hours of pumping

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

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BY: OLWR