

Job # 9220

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)

County: Tallahatchie
 Permit #: GW 43275
 Driller: Pete Sappington
 Date drilling completed: 6-20-09

For Office Use Only:
 Aquifer: _____
 Well #: E65
 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.

Information on Well Owner <i>(Landowner if borehole is not for a water well)</i>	Well or Borehole Location
Owner Name: <u>Brian Roberson Farms</u>	Latitude: <u>33° 59' 36" N</u> Longitude: <u>90° 05' 02" W</u>
Mailing Address: <u>204 N. Pamela</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>
<u>Charleston, MS 38921</u>	USGS quad, <u>(Hand-held GPS)</u> Survey-grade GPS
City State Zip Code	<u>NE 1/4 NE 1/4 Sec 33 Twn 25N Rng 2E</u>
Telephone No. <u>(662) 458-6799</u>	Distance Direction Nearest Town <u>2 Miles S-SW of Charleston, MS</u>

Well / Borehole Data

Date drilling started: 6-20-09 Date drilling completed: 6-20-09 Hole depth: 100' Hole diameter: 24"

Location of the source of any surface water used for drilling: Pond on hwy. 32, 1 1/2 mi. E. of well

Method of dosing and volume of Chlorine used in drilling and development: Sodium Hypo Chlorite @ 10 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: 28 feet above or below (circle one) land surface Date measured: 6-20-09

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

Well depth: 100' Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement (Bentonite) Mix

Casing length: 60 feet Casing diameter: 16 inches Type of casing: PVC

Screen length: 40 feet Screen diameter: 16 inches Type of screen: PVC

Screen slot size: .032 inches Setting depth: From 60 feet to 100 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*

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

RECEIVED
JUL 13 2009
BY: OLWR

RECEIVED

JUL 20 2009

BY: OLWR

STATE WELL REPORT

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)

County: TALLAHATCHIE
Permit #:
Driller: PETS SAPPINGTON
Date completed: 6-20-09
Copy information from block on Part 1

For Office Use Only
Aquifer: F65
Well #:
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: BRIAN ROBERSON FARMS, Mailing Address: 204 N. PANOLA, Charleston, MS 38921, Telephone No. (662) 458-10799
Well Location: Latitude: 33° 59' 56.6", Longitude: 90° 08' 15.7", Method of Lat/Long: Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS, NE 1/4 NE 1/4 Sec. 36 T 25N R 1E Z E, Distance 4 Miles WSW of Charleston

Pump Type: Submersible
Power Type: Electric Motor
Air Lift, Bucket, Centrifugal, Other (specify):
Date Pump Installed: 6-23-09
Rated Pump Capacity: 800 Gallons Per Minute
Diesel Engine, Gasoline Engine, Natural Gas, Hand, Tractor PTO, Windmill, Other (specify):
Horse Power Rating of Motor: 15
Setting Depth: 60 feet
Number of Stages: 1

Pump Test Data: Date Well Tested:
Static Water Level (A): 28 Feet Below Land Surface
Pumping Water Level (B):
Drawdown [(B)-(A)]:
Test Pumping Rate:
Duration of Pump Test (minimum 4 hours):
Method of Measuring Water Level: Steel Tape
Air Line, Electric Measuring Line, Other (specify):
For flowing well, measured shut in head:
Well yielded GPM with a drawdown of
feet after hours of pumping

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.
David P. Holt 0-752P
Signature of Pump Installer

Form: OLWR-SWR-1B

Job 9220