

State Well Report

Part 1 - Driller's Log

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 #: GW 44173
Driller: Joel Jump
Date drilling completed: 3/20/11

For Office Use Only:
Aquifer:
Well #: H 219
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 (Landowner if borehole is not for a water well)
Owner Name: Sternes Farm + Livestock
Mailing Address: 40665 County RR Woodland, CA 95776-9105
City: State: Zip Code:
Telephone No. ():
Well or Borehole Location
Latitude: 33° 56' 78" Longitude: 90° 21' 58"
Method of Lat/Long (circle one): Conventional Survey,
USGS quad: Hand-held GPS, Survey-grade GPS
NW 1/4 SW 1/4 Sec 13 Twn 24N Rng 2W
Distance: 5 Miles Direction: West of Webb, MS
33.947878 90.360654

Corrected with geog

Well / Borehole Data
Date drilling started: 3/20 Date drilling completed: 3/20 Hole depth: 125 Hole diameter: 24"
Location of the source of any surface water used for drilling: Canal ditch east of well
Method of dosing and volume of Chlorine used in drilling and development:
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: 27 feet above or below (circle one) land surface Date measured: 3/23
Method of Measurement (circle one): steel tape electric tape air line other:
Well depth: 125 Well grouted to a depth of 15 feet Type of grout (circle one): Neat Cement Bentonite Mix
Casing length: 85 feet Casing diameter: 12 inches Type of casing: PVC
Screen length: 40 feet Screen diameter: 12 inches Type of screen: PVC
Screen slot size: 0.050 inches Setting depth: From 85 feet to 125 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

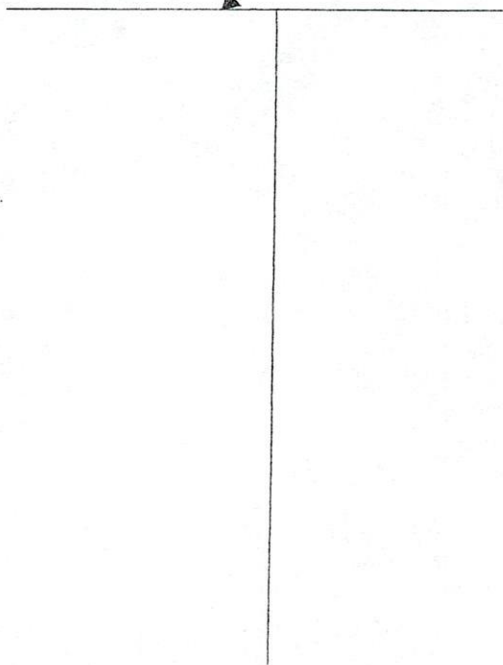
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H219
Tallahatchie

The sketch below only required for water wells

If well telescopes, show depths on sketch.

Ground Level. 

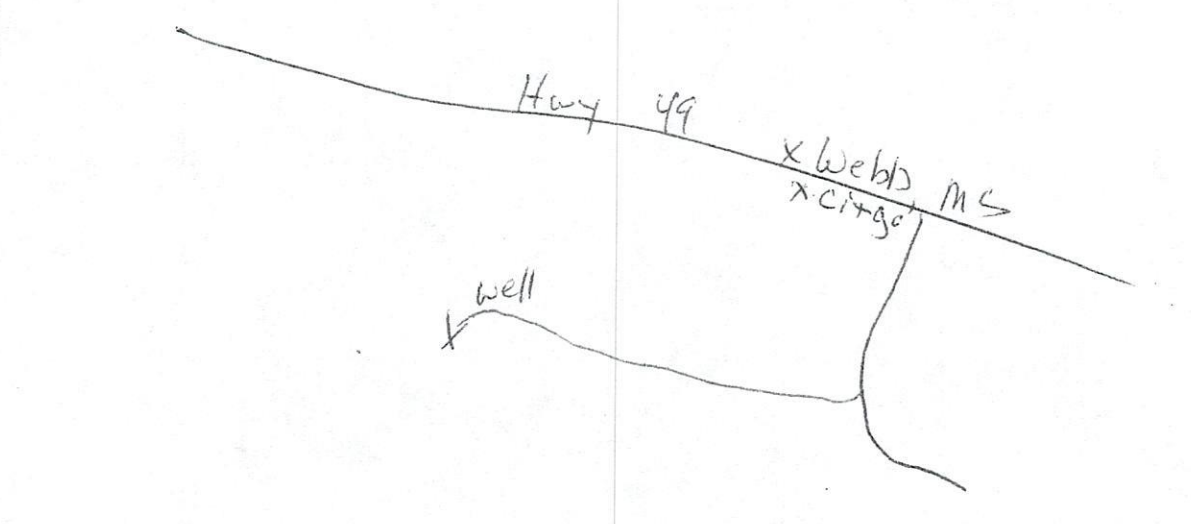


Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth) Ground Level	To (depth)

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) a north arrow.



Landowner Name: _____

Form: OLWR-SWR-1A

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.

Joel Jumper

Print Name of Responsible Licensee and License No.

3/30

Date

Joel Jumper

Signature of Licensee

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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 # 6W 44173
 Driller: Joel Jumper
 Date completed: 3/23
Copy information from block on Part 1

For Office Use Only:

Aquifer: _____
 Well #: H 219
 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	Well Location
Owner Name: <u>Sternes Farms Livestock</u> Mailing Address: _____ _____ City _____ State _____ Zip Code _____ Telephone No (____) _____	Latitude: 33 56 45 Longitude: 90 21 35 Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____ <u>NW</u> ¼ <u>SW</u> ¼ Sec <u>13</u> T <u>24N</u> R <u>2W</u> Distance _____ Direction _____ Nearest Town _____ _____ Miles _____ of _____

Pump Type Circle one	Power Type Circle one
Air Lift Jet Submersible Bucket Piston <u>Turbine</u> Centrifugal Rotary Flowing Well Other (specify): _____ Date Pump Installed: <u>3/23</u> Rated Pump Capacity: <u>2500</u> Gallons Per Minute	<u>Diesel Engine</u> Gasoline Engine Natural Gas Electric Motor Hand Tractor PTO Windmill Other (specify): _____ Horse Power Rating of Motor: _____ Setting Depth: <u>70</u> feet Number of Stages: <u>2</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>3/23</u> Static Water Level (A): <u>27</u> Feet Below Land Surface Pumping Water Level (B): <u>50</u> Feet Below Land Surface Drawdown [(B) - (A)]: <u>23</u> Feet Below Land Surface Test Pumping Rate: <u>2500</u> Gallons Per Minute Duration of Pump Test (minimum 4 hours): <u>4</u> hours	Air Line Electric Measuring Line <u>Steel Tape</u> Other (specify): _____ For flowing well, measured shut in head: _____ feet Well yielded <u>2500</u> GPM with a drawdown of <u>23</u> feet after <u>4</u> hours of pumping

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

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

Joel Jumper
 Signature of Pump Installer

Form: OLWR-SWR-1B

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