

# 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)

County: Tallahatchie  
Permit #: 6W40483  
Irrigation Equipment  
Driller: \_\_\_\_\_  
Date drilling completed: 6-24-05

For Office Use Only:  
Aquifer: \_\_\_\_\_  
Well #: J-104  
L. S. Elevation: \_\_\_\_\_  
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 Owner Information	Well Location
Owner Name <u>Flautt Farms</u>	Latitude: <u>33.54.47N</u> , Longitude: <u>90.19.28W</u> ,
Mailing Address: <u>Box 290</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u> ,
_____	USGS quad, Hand-held GPS, Survey-grade GPS
<u>Swan Lake, MS 38958</u>	SW <u>1/4</u> SW <u>1/4</u> Sec <u>29</u> Twn <u>24N</u> Rng <u>1W</u>
City State Zip Code	Distance <u>3</u> Miles Direction <u>South</u> of Nearest Town <u>Webb</u>
Telephone No. ( ) _____	

**Well Data**

Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other: \_\_\_\_\_

Date well drilling started: 6-24-05 Date well drilling completed: 6-24-05

If flowing, method of flow regulation: Valve \_\_\_\_\_ Other (describe) \_\_\_\_\_

Static Water Level: \_\_\_\_\_ feet above or below (circle one) land surface Date measured: \_\_\_\_\_

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

Hole depth: 118 Well depth: 118' Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 78 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: .050 inches Setting depth: From 79 feet to 118 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 back of page

Logs run (circle all applicable): No log run Electric Gamma Ray 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 Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

Irrigation Equipment Inc.  
Patrick M. Chism 0695

*Patrick M Chism*

Print Name of Water Well Contractor and License No.

Signature of Water Well Contractor

Owner contracted with Big-D Irrigation (Greenwood, MS).  
Big-D will have pump installed.

*Circle 5 will set pump.*

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JUL 21 2005

BY: OLWR

J-104

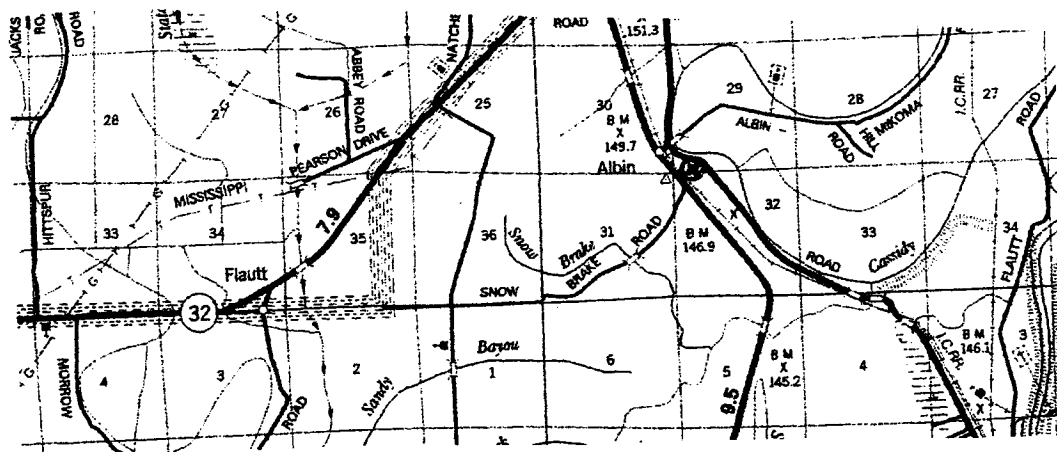
If well telescopes please sketch below and show depths.

Ground Level

Description of Formations Encountered	From	To
Clay	0	46
Fine Sand	47	55
Fine Sand/gravel	56	65
Med. Sand/gravel	66	115
Clay	116	118

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.



Landowner Name: \_\_\_\_\_

*Patrick M. Chin*  
 Signature of Water Well Contractor