State V	Vell Report				
	Driller's Log	For Office Use Only:			
Mississippi Departme	nt of Environmental Quality	Aquifer:			
Permit#: <u>GW TO 70 7</u> Office of Land a	and Water Resources Box 2309	Well #:			
1 Dailes 2	n, MS 39225	Woll #.			
Date drilling completed: $4-19-10$ (601)	961- 5210	L. S. Elevation:			
(601)96	1- 5228 (fax)	E-log #:			
State Law requires that this report be prepared by the lic	ense holder resnonsible for :				
Department at the above address within 30 days of com	pletion of drilling of the well	or borehole.			
Information on Well Owner		rehole Location			
(Landowner if borehole is not for a water well)	Latitude: 33 . 21 . 552	." Longitude 90 ° 47 ' 38."7			
Owner Name Tribbett Farms Inc.	Lautude.	33C Tangnude 10 17 00. 7			
Mailing Address: 2686 Old Huy 615	Method of Lat/Long (circle or	ne): Conventional Survey,			
	USGS quad, Hand-held	GPS, Survey-grade GPS			
	St. // N/h/1/ San 75	- fr 18 Non 6 61			
Leland Ms. 38756 City State Zip Code	SW 1/4 NW 1/4 Sec 35 Twn 18 N Rng 6 W				
City State Zip Code	Distance DirectionMiles	Nearest Town			
Telephone No. ()	Miles/Y	of Iribbest			
-					
Well / Bore	chole Data				
Date drilling started: 4-19-10 Date drilling completed: 4-19	70 Hole depth: 126	Hole diameter: 24"			
Location of the source of any surface water used for drilling:	Surface Water				
Method of dosing and volume of Chlorine used in drilling and deve	lopment: 50 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 WellGeotechnical/Geol	ogical Investigation Ground	Source Heat Pump			
Seismic Survey Other (describe	١	·· —			
If drilling is not related to water well construction, skip the remainder of this block					
Purpose of Well (check one): HomeIndustrial Public SupplyIrrigation Fish Culture Other:					
If a flowing well, method of flow regulation: Valye Other (describe)					
Static Water Level: 25 feet above of below circle one) land surface Date measured: 4-20-10					
Method of Measurement (circle one) steel tape electric tape air line other:					
Well depth: 126 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix					
Casing length: 86 feet Casing diameter: 16 inches Type of casing: PVC					
Screen length: 46 feet Screen diameter: 16 inches Type of screen: PVC					
Screen slot size:					
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)

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				
Crodity 12461	Description of Formations Encountered From	n (depth) To (depth			
		ound Level 23			
	Fine Sand	24 29			
İ	Fine Sand + Grave	30 54			
	Medium Sand + Gravel	55 126			
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aid in locat 4) a north	ut and include the following: ting the well; 3) any roads, por arrow.	1) the well location; 2) and over lines, or other items to	y permanent structures on that may aid in locating the p	ne property that may property and the well;
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ndowner Name:	ribbett Fa	arms Inc	<b>_</b>	
indowner Name:	ribbett Fa	arms Inc		orm: OI WR_SWR_1A (04)
			Fo	orm: OLWR-SWR-1A (04)
rtify that the well/bo	rehole was drilled, construct	ted, and completed in ac	Fo	ole requirements of the
rtify that the well/bo		ted, and completed in ac	Fo	ole requirements of the
rtify that the well/bo sissippi Department	rehole was drilled, construct of Environmental Quality a	ted, and completed in ac	Fo	ole requirements of the
ertify that the well/bo ssissippi Department	rehole was drilled, construct of Environmental Quality a	ted, and completed in ac	Fo	ole requirements of th

	CTATE SE	TI DEDODE				
County: Washington	STATE WELL REPORT		For Office Use Only:			
County	Part 2					
Permit#:   Irrigation Equipment	Pump Installer's Completion Report Mississippi Department of Environmental Quality		Aquifer: F 170			
Driller:	Office of Land and Water Resources P.O. Box 2309		Well #:			
Date completed: 4-19-10		, MS 39225	Elevation:			
Copy information from block on Part 1		961-5210 1-5228 (fax)				
This part of the report must be sounded.						
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.						
Men Owner intolmat	ion	Well	Location			
Owner Name: Tribbett Fa	-arms Inc. Latitude:		Longitude:			
Mailing Address: 2686 Old			e): Conventional Survey ,			
	/		GPS Survey-grade GPS			
Leland Ms. City State	5. 38756 SW 1/NW 1/4 Sec_		35 T18N R6W			
Telephone No. ()			Nearest Town			
	* **					
Pump Type		Dow	ег Туре			
Circle one			rcle one			
Air Lift Jet	Submersible	Diesel Engine Gasoline				
Bucket Piston	Turbine	Electric Motor Hand	Tractor PTO			
Centrifugal Rotary	Flowing Well	Windmill Other (s	pecify):			
Other (specify):	Horse Power Rating of Motor: 40		40			
Date Pump Installed: 4-20-/		Setting Depth:	feet feet			
Rated Pump Capacity: 1800 ±	Gallons Per Minute	Number of Stages: 2				
Pump Test Data	*					
Date Well Tested:		Cir	suring Water Level cle one			
Static Water Level (A):Feet 1	Below Land Surface		uring Line Steel Tape			
Pumping Water Level (B):Feet F	Below Land Surface	Other (specify):				
Drawdown [(B) - (A)]:Feet I	Below Land Surface	For flowing well, measured shu	t in head:feet			
Test Pumping Rate:	Gallons Per Minute	Well yielded	GPM with a drawdown of			
Duration of Pump Test (minimum 4 hours):	hours	feet after	hours of pumping			
This is for (circle one): New Well Replacement of Existing Pump Repair of Existing Pump						

I HEREBY CERTIFY that the above statements are true to the best of mykr

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

Patrick M. Chism

0695

Signature of Pump Installer
Form: OLWR-SWR-1C (07-09)