

May 04 05 01:12p

Mid-South Water

(662)843-1717

P. 3 200

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)961-5200
(601)354-6938 (fax)

For Office Use Only:	
Aquifer:	_____
Well #:	<u>A-75</u>
L. S. Elevation:	_____
Log #:	_____

County:	<u>Yazoo</u>
Permit #:	<u>CW 40734</u>
Driller:	<u>Mike Wells</u>
Date drilling completed:	<u>4/22/05</u>

FAXED
4/29/05

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>Eden Fisheries</u>	Latitude: _____ Longitude: _____
Mailing Address: <u>3060 Money Sunk Rd.</u>	Method of Lat/Long (circle one): Conventional Survey,
<u>Yazoo City, MS 39194</u>	USGS quad, Hand-held GPS, Survey-grade GPS
City: _____ State: _____ Zip Code: _____	_____ 1/4 _____ 1/4 Sec <u>11</u> Twn <u>13N</u> Rng. <u>2W</u>
Telephone No. <u>(602) 746-5085</u>	Distance _____ Miles Direction _____ Nearest Town _____

Well Data

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

Date well drilling started: 4/22/05 Date well drilling completed: 4/22/05

If flowing, method of flow regulation: Valve N/A Other (describe) _____

Static Water Level: 16 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: 117' Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 77' feet Casing diameter: 16" inches Type of casing: PVC

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

Screen slot size: 0.50 inches Setting depth: From 77 feet to 117 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: N/A 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): N/A

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.

Thomas G. Christman 0-7034 Thomas G. Christman
Print Name of Water Well Contractor and License No. Signature of Water Well Contractor

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Mid-South Water

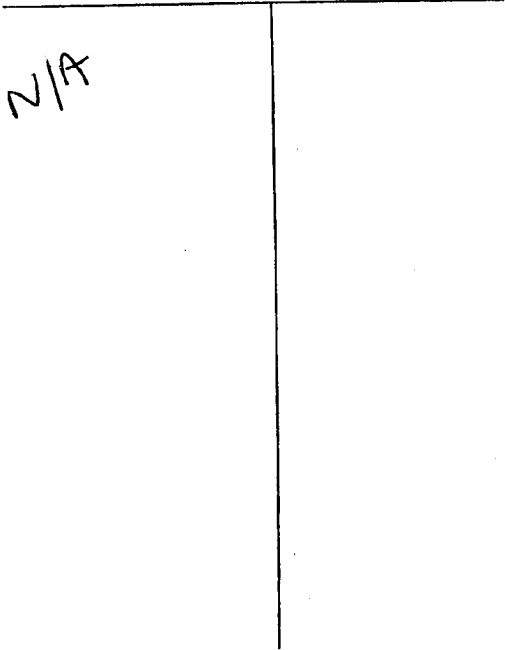
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If well telescopes please sketch below and show depths.

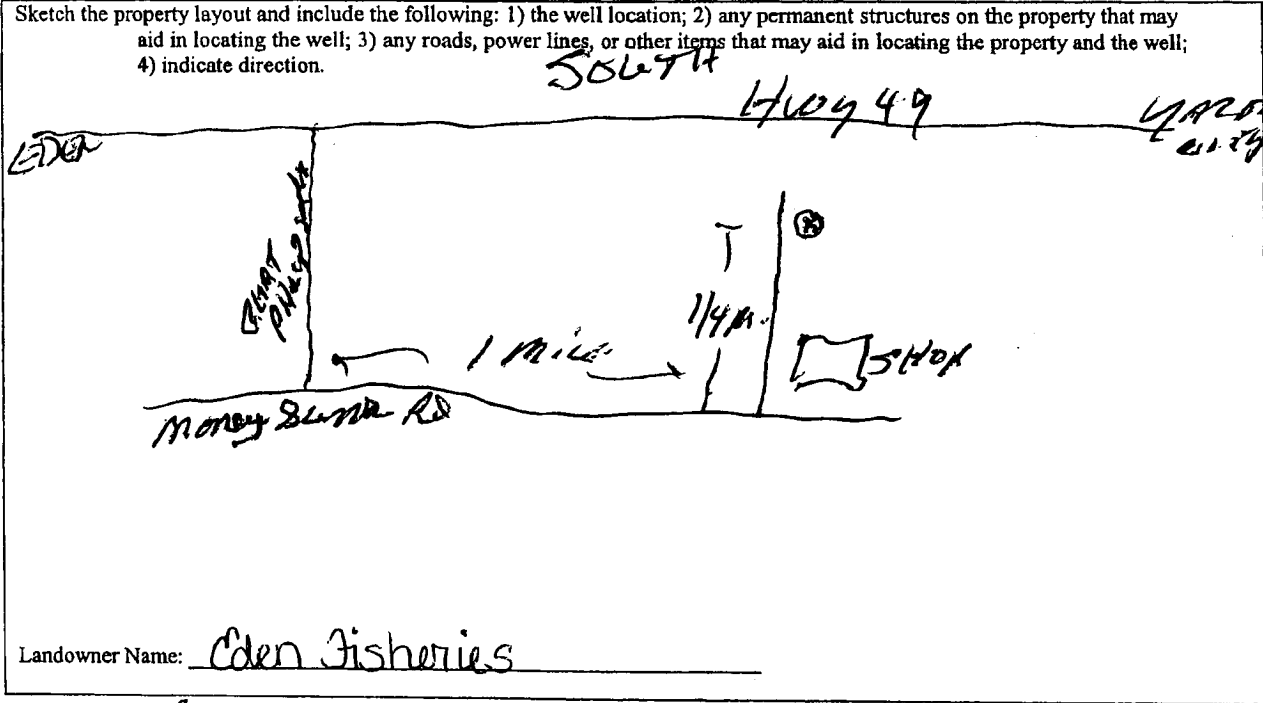
A-75

Ground Level



Description of Formations Encountered	From	To
Clay	0	14
Clay w/ streaks of Sand	14	24
Fine Sand	24	39
Medium Sand	39	89
Coarse Sand & Gravel	89	117
Clay	118	118

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



Signature of Water Well Contractor

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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)

For Office Use Only:

Aquifer: _____
 Well #: A-75
 Elevation: _____

County: Yazoo
 Permit #: _____
 Driller: Mike Wells
 Date completed: 4/22/05

This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump.

Well Owner Information	Well Location
Owner Name: <u>Eden Fisheries</u>	Latitude: _____ Longitude: _____
Mailing Address: <u>3060 Money Sunk Rd.</u> <u>Yazoo City, MS</u> <u>39194</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
City State Zip Code	<u>1/4</u> <u>1/4</u> Sec <u>11</u> Twn <u>13N</u> Rng <u>2W</u>
Telephone No. <u>(662) 746-5085</u>	Distance Direction Nearest Town _____ Miles _____ of _____

Pump Type Circle one	Power Type Circle one
Air Lift Jet Submersible	<u>Diesel Engine</u> Gasoline Engine Natural Gas
Bucket Piston <u>Turbine</u>	Electric Motor Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): <u>Gear Drive</u> <u>1:1</u>
Other (specify): _____	Horse Power Rating of Motor: _____
Date Pump Installed: <u>4/29/05</u>	Setting Depth: <u>70</u> feet
Rated Pump Capacity: <u>2000</u> Gallons Per Minute	Number of Stages: <u>1</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>NOT TESTED</u>	Air Line Electric Measuring Line <u>Steel Tape</u>
Static Water Level (A): <u>18' 11"</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>N/A</u> Feet Below Land Surface	For flowing well, measured shut in head: <u>N/A</u> feet
Drawdown [(B) - (A)]: <u>N/A</u> Feet Below Land Surface	Well yielded <u>N/A</u> GPM with a drawdown of _____ feet after _____ hours of pumping
Test Pumping Rate: <u>N/A</u> Gallons Per Minute	
Duration of Pump Test (minimum 4 hours): <u>N/A</u> hours	

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.
Thomas G. Christman 0-7032
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

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