

#1 #4 in permit

County: Benton  
 Permit #: MS-GW-17201  
 Driller: Rodney Tatum  
 Date drilling completed: 1-27-15

### 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 39225-2309  
 (601)961-5210  
 (601)360-0535 (fax)

**For Office Use Only:**  
 Well #: 130047  
 Aquifer: \_\_\_\_\_  
 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.

<b>Well Owner Information</b> (Landowner if borehole is not for a water well)		<b>Well or Borehole Location</b>	
Owner Name: <u>GARY TAYLOR</u>		Latitude: <u>34.9507</u> Longitude: <u>89.2211</u>	
Mailing Address: <u>10355 Memphis Arlington Rd.</u>		Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____	
City: <u>Lakeland</u>	State: <u>MS</u>	Zip Code: <u>39002</u>	_____ 1/4 _____ 1/4, Sec _____ T _____ R _____
Telephone No. <u>(901) 338-338-9686</u>		_____ Miles _____ of _____ (Distance) (Direction) (Nearest Town)	

**Well / Borehole Data**

Date drilling started: 1-27-15 Date drilling completed: 1-27-15 Hole depth: 97' Hole diameter: 10"

Location of the source of any surface water used for drilling: NONE

Method of dosing and volume of Chlorine used in drilling and development: 4 ppm

Logs run (circle all applicable):  No log run  Electric  Gamma Ray  Density  Sonic  Neutron Other: N/A

Name of organization running log(s): ~~OLWR~~

Purpose of borehole (circle one):  Water Well  Geotechnical/Geological Investigation  Ground Source Heat Pump  Seismic Survey Other (describe) IRRIGATION

*If drilling is not related to water well construction, skip the remainder of this block*

Purpose of Well (circle all applicable): Home Industrial Public Supply  Irrigation Fish Culture

Other (describe): \_\_\_\_\_

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

Static Water Level: 15' feet [above or  below] land surface Date measured: 1-27-15

Method of measurement (circle one):  Steel tape  Electric tape  Air line Other (describe): \_\_\_\_\_

Well depth: 97' Well grouted to a depth of: 57' feet Type of grout (circle one): Neat Cement  Bentonite Mix

Casing length: 57' feet Casing diameter: 10" inches Type of casing: PVC

Screen length: 46' feet Screen diameter: 10" inches Type of screen: PVC

Screen slot size: 0.32 inches Setting depth: From 57' feet to 84' 97' feet

Type of completion (circle all applicable):  Gravel packed  Underreamed  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*

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FEB 08 2018

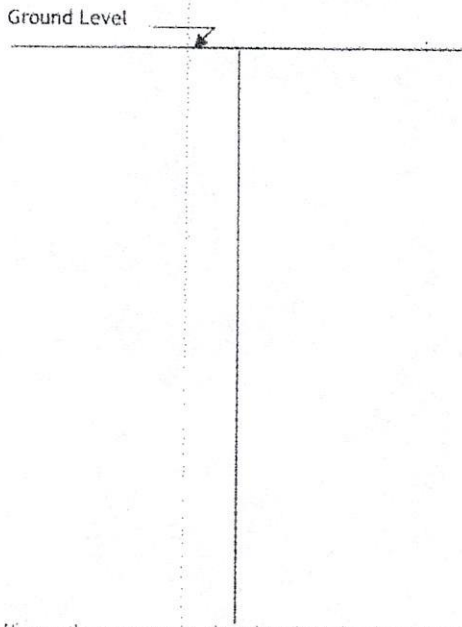
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County: Benton  
Permit #: 17201

For Office Use Only:  
Well #: B0047

The sketch below only required for water wells

If well telescopes, show depths on sketch.



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

Description of Formations Encountered	From (depth)	To (depth)
	Ground level	10
Brown Clay	10	30
White Clay	30	97
Coarse Sand		

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) north arrow

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

I HEREBY 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.

Robert Tatum UNR-6600 [Signature]  
Print Name of Responsible Licensee and License No. Date 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 2309  
 Jackson, MS 39225-2309  
 (601)961-5210  
 (601) 360-0535 (fax)

**For Office Use Only:**  
 Well #: B0047  
 Aquifer: \_\_\_\_\_

County: Benton  
 Permit #: 17201  
 Driller: Rodney Tatum  
 Date completed: 3-3-15  
*Copy information from block on Part 1*

*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>Gary W Taylor</u>	Latitude: <u>34.9521</u> Longitude: <u>-89.2205</u>
Mailing Address: <u>10355 Memphis</u>	Method of Lat/Long (check one): Conventional Survey _____
<u>Arlington Rd</u>	USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
<u>Lakeland TN 38002</u>	_____ 1/4 _____ 1/4, Sec. _____ T. _____ R. _____
City State Zip Code	Miles _____ of _____
Telephone No. (901) <u>338-9686</u>	(Distance) (Direction) (Nearest Town)

**Pump Type (check one)**

Submersible  Turbine  Air Lift  Centrifugal  Flowing Well  Jet  Piston  Rotary  Other (describe): \_\_\_\_\_

Date Pump Installed: 3-3-15 Rated Pump Capacity: 400 Gallons Per Minute

Is This Pump (check one):  New  Repaired  Replacement

**Power Type (check one)**

Electric  Diesel  Gasoline  Natural Gas  Tractor PTO  Windmill  Other (describe): \_\_\_\_\_

Horse Power Rating of Motor: 25 Setting Depth: 84 feet Number of Stages: \_\_\_\_\_

**Pump Test Data for Non Flowing Well**

Date Well Tested: 3-3-15 Duration of Pump Test (minimum 4 hours): 4 hours

Static Water Level (A): 15 Feet Below Land Surface Pumping Water Level (B): 60 Feet Below Land Surface

Drawdown [(B) - (A)]: 45 Feet Below Land Surface Test Pumping Rate: 400 Gallons Per Minute

Method of measurement (check one): Steel tape  Electric tape  Air line  Other (describe): \_\_\_\_\_

**Pump Test Data for Flowing Well**

Measured shut in head: \_\_\_\_\_ feet.

Well yielded \_\_\_\_\_ GPM with a drawdown of \_\_\_\_\_ feet after \_\_\_\_\_ hours of pumping

**Meter Installation**

Meter Manufacturer: \_\_\_\_\_ Meter Serial Number: \_\_\_\_\_

Meter Model Number/Name: \_\_\_\_\_ Type of Meter: \_\_\_\_\_

Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): \_\_\_\_\_

Installation Date: \_\_\_\_\_ Meter installed by: \_\_\_\_\_

Is This Meter (check one):  New  Repaired  Replacement

*Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.*

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

Rodney Tatum UNE-6600 \_\_\_\_\_  
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer

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6-1-64



#1 #4 on permit table

# 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 39225-2309  
(601)961-5210  
(601)360-0535 (fax)

#### For Office Use Only:

Well #: B47  
Aquifer: \_\_\_\_\_  
E-Log #: \_\_\_\_\_

County: Benton  
Permit #: MS-GW-17201  
Driller: Rodney Tatum  
Date drilling completed: 1-27-15

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.

Well Owner Information (Landowner if borehole is not for a water well)	Well or Borehole Location
Owner Name: <u>GARY TAYLOR</u>	Latitude: <u>34.9507</u> Longitude: <u>89.2211</u>
Mailing Address: <u>10355 Memphis Arlington Rd.</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS <u>X</u> , Survey-grade GPS _____
City: <u>Lakeland</u> State: <u>MS</u> Zip Code: <u>39002</u>	<u>NE</u> 1/4 <u>SW</u> 1/4, Sec <u>32</u> T <u>O1S</u> R <u>O1E</u>
Telephone No. ( <u>901</u> ) <del>338</del> - <u>338-9686</u>	_____ Miles _____ of _____ (Distance) (Direction) (Nearest Town)

**Well / Borehole Data**

Date drilling started: 1-27-15 Date drilling completed: 1-27-15 Hole depth: 97' Hole diameter: 10"

Location of the source of any surface water used for drilling: NONE

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: N/A

Name of organization running log(s): ~~\_\_\_\_\_~~

Purpose of borehole (circle one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump Seismic Survey Other (describe) IRRIGATION

*If drilling is not related to water well construction, skip the remainder of this block*

Purpose of Well (circle all applicable): Home Industrial Public Supply Irrigation Fish Culture

Other (describe): \_\_\_\_\_

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

Static Water Level: 15' feet [above or below land surface] (circle one) Date measured: 1-27-15

Method of measurement (circle one): Steel tape Electric tape Air line Other (describe): \_\_\_\_\_

Well depth: 97' Well grouted to a depth of: \_\_\_\_\_ feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: ~~20' 57'~~ feet Casing diameter: 10" inches Type of casing: PVC

Screen length: ~~20'~~ 40' feet Screen diameter: 10" inches Type of screen: PVC

Screen slot size: 0.32 inches Setting depth: From 57' feet to 97' feet

Type of completion (circle all applicable): Gravel packed Underreamed Open hole Natural Development

Other (describe): \_\_\_\_\_

Top of lap pipe or reduction in casing: \_\_\_\_\_ feet

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If telescoped or more than one screen, describe on next page

Handwritten notes in the top left corner, possibly including a date or reference number.

Handwritten number '749' in the upper middle section.

Handwritten text '11-1-1918' in the middle left section.

Handwritten text '10-1-1918' in the middle right section.

Handwritten text '310 310' in the lower middle section.

Handwritten text '310' enclosed in a circle in the lower middle section.

Handwritten text '10/19/18' in the bottom right corner.





#4  
no permit  
file

# STATE WELL REPORT

## Part 2

**Pump Installer's Completion Report**  
Mississippi Department of Environmental Quality  
Office of Land and Water Resources  
P.O. Box 2309  
Jackson, MS 39225-2309  
(601)961-5210  
(601) 360-0535 (fax)

### For Office Use Only:

Well #: B47  
Aquifer: \_\_\_\_\_

County: \_\_\_\_\_  
Permit #: \_\_\_\_\_  
Driller: \_\_\_\_\_  
Date completed: \_\_\_\_\_

*Copy information from block on Part 1*

*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>Gary Taylor</u>			Latitude: <u>34.9507</u> Longitude: <u>89.2211</u>		
Mailing Address: _____			Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____		
City _____ State _____ Zip Code _____			_____ 1/4 _____ 1/4, Sec _____ T _____ R _____		
Telephone No. (____) _____			_____ Miles _____ of _____ (Distance) (Direction) (Nearest Town)		

**Pump Type (circle one)**

Submersible  Turbine  Air Lift  Centrifugal  Flowing Well  Jet  Piston  Rotary  Other (describe): \_\_\_\_\_

Date Pump Installed: \_\_\_\_\_ Rated Pump Capacity: \_\_\_\_\_ Gallons Per Minute

Is This Pump (circle one): New  Repaired  Replacement

**Power Type (circle one)**

Electric  Diesel  Gasoline  Natural Gas  Tractor PTO  Windmill  Other (describe): \_\_\_\_\_

Horse Power Rating of Motor: \_\_\_\_\_ Setting Depth: \_\_\_\_\_ feet Number of Stages: \_\_\_\_\_

**Pump Test Data for Non Flowing Well**

Date Well Tested: \_\_\_\_\_ Duration of Pump Test (minimum 4 hours): \_\_\_\_\_ hours

Static Water Level (A): \_\_\_\_\_ Feet Below Land Surface Pumping Water Level (B): \_\_\_\_\_ Feet Below Land Surface

Drawdown [(B) - (A)]: \_\_\_\_\_ Feet Below Land Surface Test Pumping Rate: \_\_\_\_\_ Gallons Per Minute

Method of measurement (circle one): Steel tape  Electric tape  Air line  Other (describe): \_\_\_\_\_

**Pump Test Data for Flowing Well**

Measured shut in head: \_\_\_\_\_ feet.

Well yielded \_\_\_\_\_ GPM with a drawdown of \_\_\_\_\_ feet after \_\_\_\_\_ hours of pumping

**Meter Installation**

Meter Manufacturer: \_\_\_\_\_ Meter Serial Number: \_\_\_\_\_

Meter Model Number/Name: \_\_\_\_\_ Type of Meter: \_\_\_\_\_

Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): \_\_\_\_\_

Installation Date: \_\_\_\_\_ Meter installed by: \_\_\_\_\_

Is This Meter (circle one): New  Repaired  Replacement

**Important:** By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.

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

FEB 26 2015

Print Name of Pump Installer and License No. (if applicable) \_\_\_\_\_ Date \_\_\_\_\_ Signature of Pump Installer BY: OLWR





Drilled #1 11302U

Well Request Form

Customer Name: Gary Taylor

Cust. Phone #:

Coordinates: 34.9507 -89.2211

Farm Name: Sparks

Field Name: Southeast

State and County: Benton, MS

Salesman: Tre

GPM: 400

Pressure: 19

TDH:

Well HP: 3"

Volts: Elec/Sub Elec / Turbine Gear

Recommended Well Casing Size:

10

Plastic Steel

Quoted Price: \$25,500

Sold Price:

4 hrs 6 hrs 50' pipe buried down hill 6" pipe

Drilling Notes:

Drill Operator:	No - no borings
Bore Hole Depth:	97
Static Water Level:	15
Recommended Setting:	63
Final HP:	
Drill Tag #:	
Additional Notes:	2 buckets poly 3 10in casing 2 10in strainers 2 10in caps

Formation

0-10 - brown clay  
10-30 - white clay  
30-97 - coarse sand

84' setting = 143' TDH  
25 hp Franklin  
25  
150' TDH

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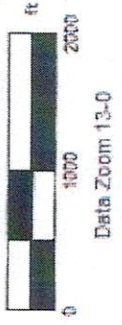
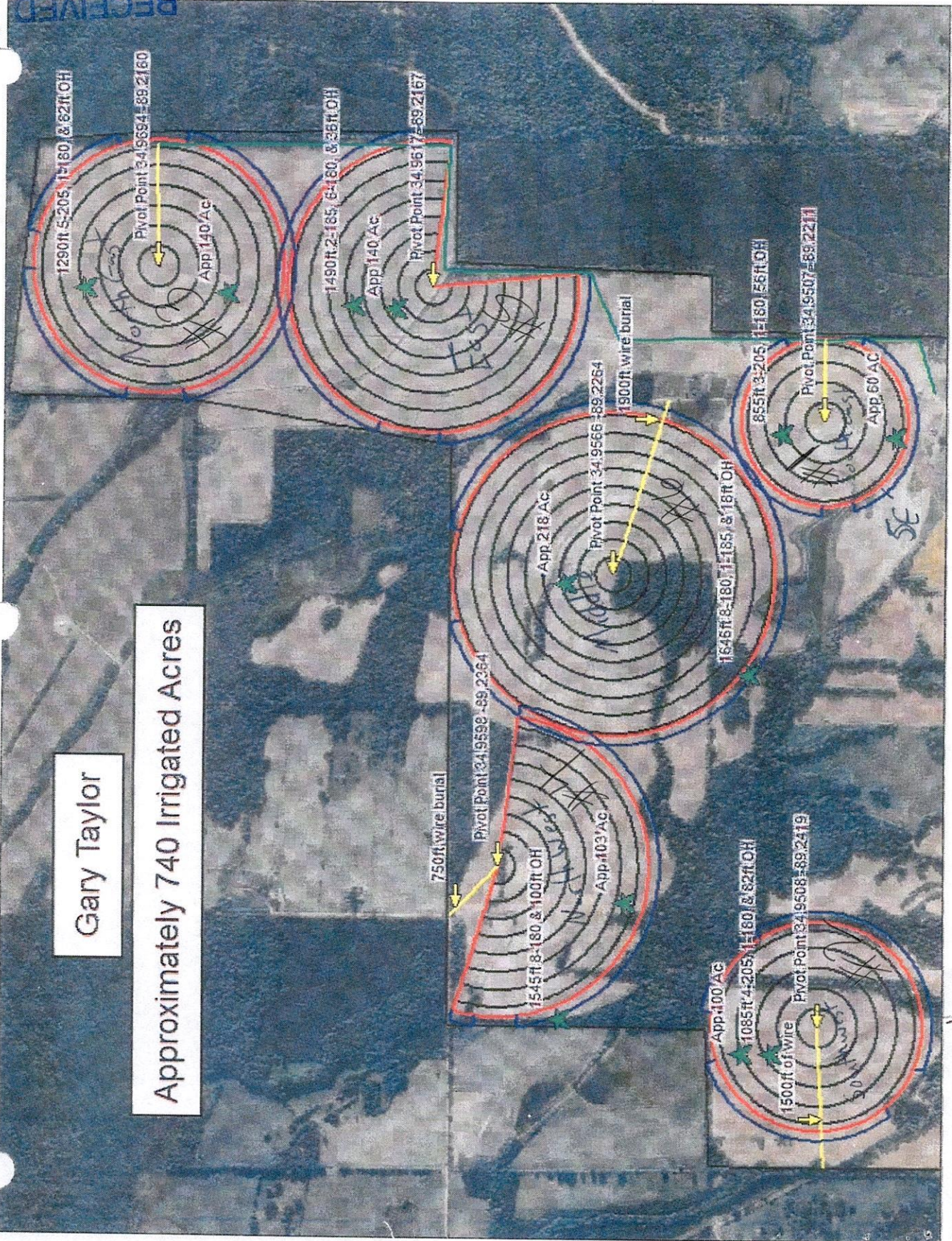
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BY: OLWR



Gary Taylor

Approximately 740 Irrigated Acres



Entrance 34,9467  
-89,2204

SE

MIN (1.6" W)

E-Filed



#1 34.9507 - 89.2211

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BY: OLWR



Southeast

Gary Taylor