

#3 #6 in permit

County: Benton  
 Permit #: MS-GW-17204  
 Driller: Rodney Tatum  
 Date drilling completed: 1-29-15

**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 #: B0050  
 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.

Well Owner Information <small>(Landowner if borehole is not for a water well)</small>	Well or Borehole Location
Owner Name: <u>GARY TAYLOR</u>	Latitude: <u>34.9694</u> Longitude: <u>89.2160</u>
Mailing Address: <u>10355 Memphis</u> <u>Arlington Rd.</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
<u>Lakeland</u> <u>MS</u> <u>38009</u>	_____ 1/4 _____ 1/4, Sec _____ T _____ R _____
City State Zip Code	_____ Miles _____ of _____ (Distance) (Direction) (Nearest Town)
Telephone No. <u>(901) 338-9080</u>	

**Well / Borehole Data**

Date drilling started: 1-29-15 Date drilling completed: 1-29-15 Hole depth: 260' Hole diameter: 12"

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): \_\_\_\_\_

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

*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: Flowing feet (above or below) land surface Date measured: 1-29-15  
(circle one)

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

Well depth: 260 Well grouted to a depth of: \_\_\_\_\_ feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 220 feet Casing diameter: 12" inches Type of casing: PVC

Screen length: 40 feet Screen diameter: 12" inches Type of screen: PVC

Screen slot size: .032' inches Setting depth: From 220 feet to 150 260 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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County: Benton  
 Permit #: MS-GW-17204

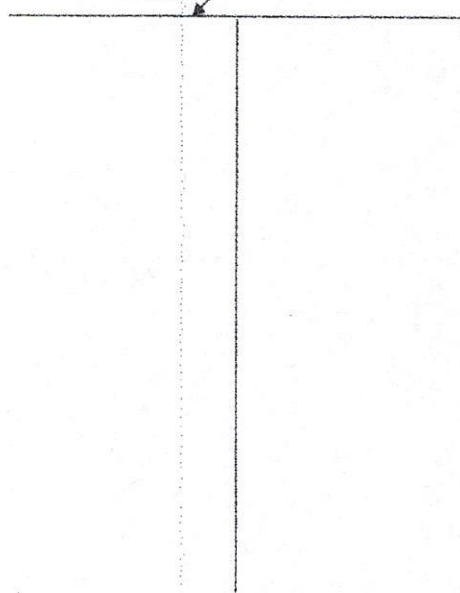
For Office Use Only:  
 Well #: B0050

The sketch below only required for water wells

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

If well telescopes, show depths on sketch.

Ground Level →

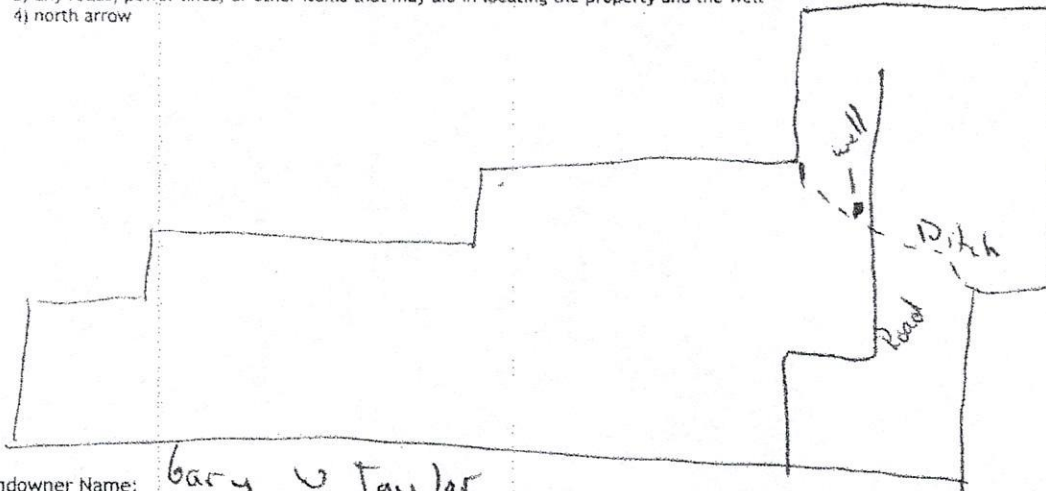


Description of Formations Encountered	From (depth)	To (depth)
Brown Clay	Ground level	15
White Clay / Sand	15	70
Rock	70	75
Grey Clay	75	90
Rock	90	91
Grey Clay	91	105
Rock	105	108
Grey Clay	108	150
White Clay	150	180
Fine Sand	180	210
Coarse Sand	210	260

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: Gary V Taylor

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.

Rodney Tatum      4NR-6600  
 Print Name of Responsible Licensee and License No.

Date

Rodney Tatum  
 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)

County: Rankin  
Permit #: \_\_\_\_\_  
Driller: Rodney Tatum  
Date completed: 3-17-15  
*Copy information from block on Part 1*

**For Office Use Only:**  
Well #: B0050  
Aquifer: \_\_\_\_\_

*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: <del>34.9628</del> <u>34.9694</u>	Longitude: <del>-89.2184</del> <u>-89.2160</u>	
Mailing Address: <u>10355 Memphis</u> <u>Arlington Rd</u>	Method of Lat/Long (check one): Conventional Survey _____		
<u>Lakeland</u> City	<u>TN</u> State	<u>38002</u> Zip Code	USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
Telephone No. <u>(901) 338-9686</u>	Miles _____ of _____ (Distance) (Direction) (Nearest Town)		

**Pump Type (check one)**

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

Date Pump Installed: 3-17-15 Rated Pump Capacity: 850 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: 75 Setting Depth: 150 feet Number of Stages: \_\_\_\_\_

**Pump Test Data for Non Flowing Well**

Date Well Tested: 3-17-15 Duration of Pump Test (minimum 4 hours): 4 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 (check one): Steel tape  Electric tape  Air line  Other (describe): \_\_\_\_\_

**Pump Test Data for Flowing Well**

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

Well yielded 850 GPM with a drawdown of 120 feet after 4 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

~~MS~~ #6 on Permit File

# 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 #: 350  
Aquifer: \_\_\_\_\_  
E-Log #: \_\_\_\_\_

County: Benton  
Permit #: MSGW-17204  
Driller: Rodney Tatum  
Date drilling completed: 1-29-15

*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 <small>(Landowner if borehole is not for a water well)</small>	Well or Borehole Location
Owner Name: <u>Gary Taylor</u>	Latitude: <del>34-9699</del> <u>34-58-10</u> Longitude: <u>89-2160</u>
Mailing Address: <u>10355 Memphis</u> <u>Arlington Rd.</u>	Method of Lat/Long (check one): Conventional Survey _____, Hand-held GPS _____, Survey-grade GPS _____
<u>Lakeland</u> City <u>MS</u> State <u>38009</u> Zip Code	USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
Telephone No. <u>(901) 338-9080</u>	<u>SE</u> 1/4 <u>NE</u> 1/4, Sec <u>29</u> T <u>01S</u> R <u>01E</u>
	_____ Miles _____ of _____ (Distance) (Direction) (Nearest Town)

#### Well / Borehole Data

Date drilling started: 1-29-15 Date drilling completed: 1-29-15 Hole depth: 260' Hole diameter: 12"

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: Flowing feet (above) or below land surface Date measured: 1-29-15  
(circle one)

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

Well depth: 260 Well grouted to a depth of: \_\_\_\_\_ feet Type of grout (circle one): Neat Cement    Bentonite    Mix

Casing length: ~~2020~~ 2040 feet Casing diameter: 12" inches Type of casing: PVC

Screen length: 2040 feet Screen diameter: 12" inches Type of screen: PVC

Screen slot size: .032' inches Setting depth: From 220 feet to 260 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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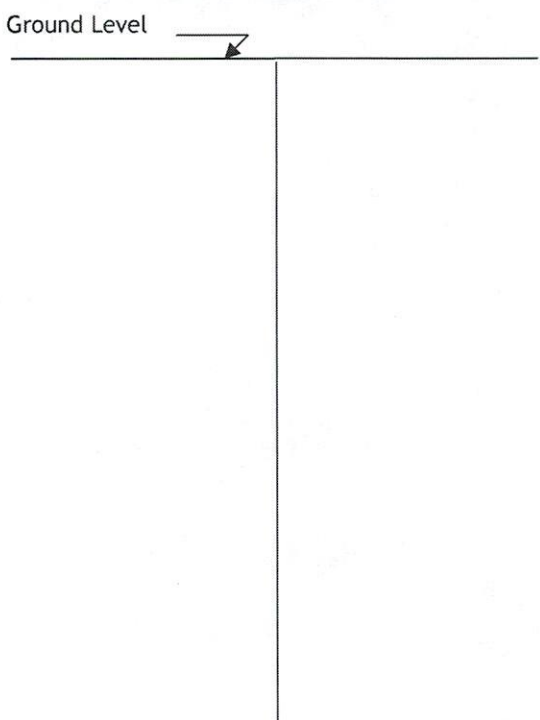
#3 #6 in Permit file

County: \_\_\_\_\_  
Permit #: \_\_\_\_\_

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

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

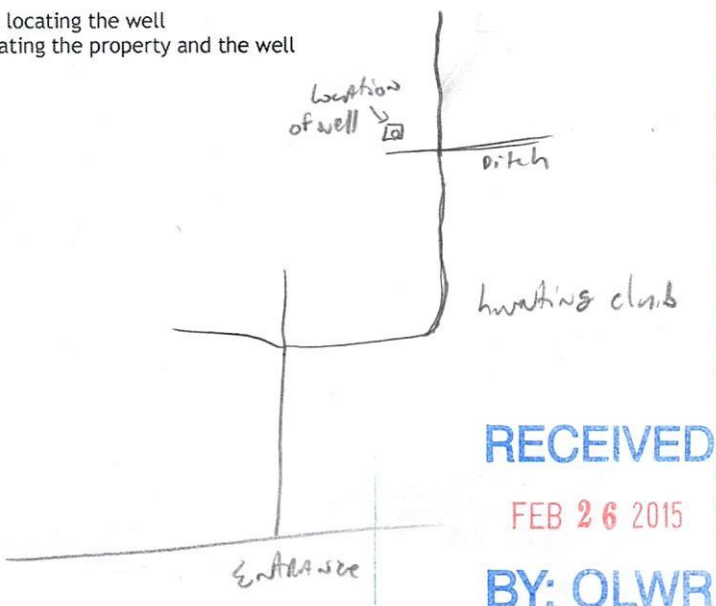
Description of Formations Encountered	From (depth)	To (depth)
Brown Clay	Ground level	15
White Clay & Sand	15	70
Rock	70	75
Grey Clay	75	90
Rock	90	91
Grey Clay	91	105
Rock	105	108
Grey Clay	108	150
White Clay	150	180
Fine Sand	180	210
Coarse Sand	210	260

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

See Attached  
MAP



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Landowner Name: Gary Taylor

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.

Redney Takum OLWR-00006600  
Print Name of Responsible Licensee and License No.

2-22-15  
Date

Redney Takum  
Signature of Licensee

# STATE WELL REPORT

#3 #6 in permit file

## 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 #: \_\_\_\_\_

Aquifer: \_\_\_\_\_

County: Benton  
Permit #: \_\_\_\_\_  
Driller: Rocky Tatum  
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>34.9694</u> Longitude: <u>89-2160</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.*

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

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BY: OLWR

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



#3 #16  
113028

McNeill

Well Request Form

Customer Name: Gary Taylor

Cust. Phone #:

Coordinates: 34.9694 -89.2160

Farm Name: Sparks

Field Name: Northeast

State and County: Benton, MS

Salesman: Tre

GPM: 850

Pressure: 27

TDH:

Well HP: ~~60~~ 75

Volts:

Elec/Sub

Elec / Turbine

Gear

Recommended Well Casing Size:

12

Plastic

Steel

Quoted Price: \$35,500

Sold Price:

250' pipe burial  
10" PIP Pipe

Drilling Notes:

12 hrs.

Drill Operator:	Mo
Bore Hole Depth:	260
Static Water Level:	Flowing
Recommended Setting:	120
Final HP:	
Drill Tag #:	
Additional Notes:	24 bags of mud - 3 buckets poly 1-screen

Formation

0-15 brown clay  
15-70 - white clay/sand  
70-75 - rock  
75-80 - gray clay  
90-92 rock  
91-105 - gray clay  
105-108 - rock  
108-150 - gray clay  
150-180 - white clay  
180-210 - fine sand  
210-260 - coarse sand

150' setting  
~~screen~~  
75  
hr electric

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257' TDH = 180' setting

12' head loss  
for 2500' pipe

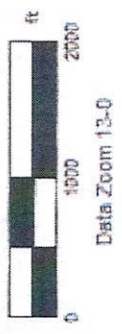
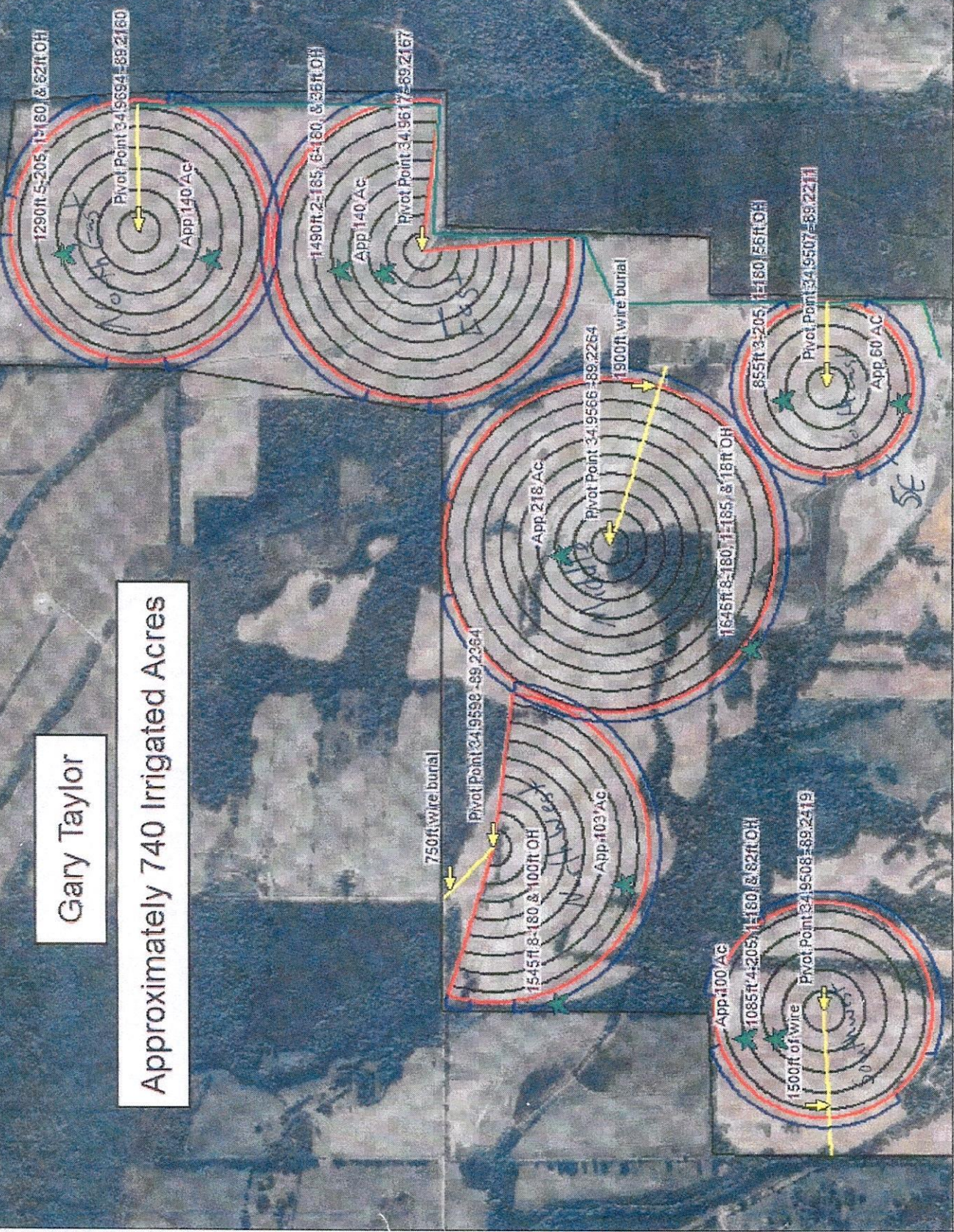
11.11.15

Gary Taylor

Approximately 740 Irrigated Acres

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Entrance 34,9467  
-89,2204

MN (1.6° W)

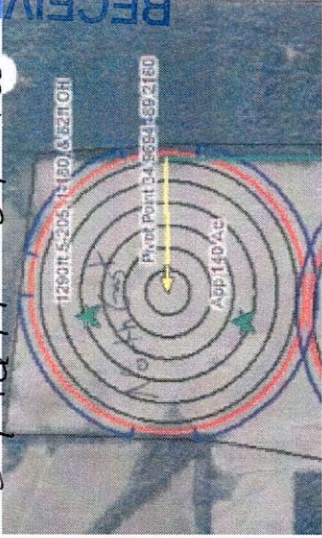
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#3

349694-89.2160



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Northeast  
Gary Taylor