

County: Bolivar
 Permit #: GW-47111
 Driller: Irrigation Equipment
 Date drilling completed: 04/17/2013

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
 (601) 961-5210
 (601) 961-5228 (fax)

For Office Use Only:

Aquifer: _____
 Well #: B188
 L.S. Elevation: _____
 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.

Information on Well Owner <i>(Landowner if borehole is not for a water well)</i>	Well or Borehole Location
Owner Name: <u>Burroughs Farms</u>	Latitude: <u>34</u> ° <u>01</u> ' ¹⁷ <u>16</u> " Longitude: <u>90</u> ° <u>44</u> ' <u>50</u> "
Mailing Address: <u>84 Burroughs Road</u>	Method of Lat/Long (check one): <input type="checkbox"/> Conventional Survey,
<u>Shelby</u> <u>Ms</u> <u>38774</u>	<input type="checkbox"/> USGS quad, <input checked="" type="checkbox"/> Hand-held GPS, <input type="checkbox"/> Survey-grade GPS
City State Zip code	<u>NW</u> 1/4 <u>SW</u> 1/4 Sec <u>20</u> ✓ Twn <u>25 N</u> ✓ Rng <u>5 W</u> ✓
Telephone No. () -	Distance Direction Nearest Town
	<u>1</u> Miles <u>South</u> of <u>Duncan</u>

Well / Borehole Data

Date drilling started: 04/17/2013 Date drilling completed: 04/17/2013 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 development: 50 PPM

Logs run (check all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: _____

Name of organization running log(s): _____

Purpose of borehole (check one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump

Seismic Survey Other (describe) _____

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

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

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

Static Water Level: 39 feet above or below (check one) land surface Date measured: 04/18/2013

Method of Measurement (check one) steel tape electric tape air line other: _____

Well depth: 126 Well grouted to a depth of 10 feet Type of grout (check one): Neat Cement Bentonite Mix

Casing length: 86 feet Casing diameter: 16 inches Type of casing: PVC

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

Screen slot size: .050 inches Setting depth: From 87 8/6 feet to 126 feet

Type of completion (check 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)

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BY: OLWR

B188

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

Ground level

Ground level

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

Description of Formations Encountered	From (depth)	To (depth)
Clay	Ground level	19
Fine Sand	20	32
Fine Sand & Gravel	33	44
Medium Sand & Gravel	45	126

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) a north arrow.

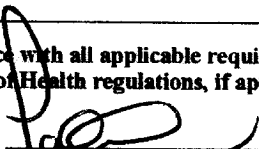
Landowner Name: Burroughs Farms

Form: OLWR-SWR-1A (04/08)

I 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.

Patrick Chism 0695
Print Name of Responsible Licensee and License No.

04/25/2013
Date


Signature of Licensee

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BY: OLWR

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
(601) 961-5210
(601) 961-5228 (fax)

For Office Use Only:	
Aquifer: _____	Well #: <u> B188 </u>
Elevation: _____	

County: <u> Bolivar </u>
Permit #: <u> GW-47111 </u>
Driller: <u> Irrigation Equipment </u>
Date drilling completed: <u> 04/17/2013 </u>
<i>Copy information from block on Part 1</i>

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.

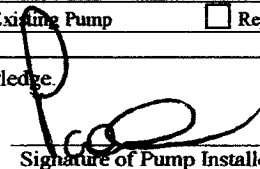
<p style="text-align: center;">Well Owner Information</p> <p>Owner Name: <u> Burroughs Farms </u></p> <p>Mailing Address: <u> 84 Burroughs Road </u></p> <p style="text-align: center;"><u> Shelby </u> <u> Ms </u> <u> 38774 </u> City State Zip code</p> <p>Telephone No. () - _____</p>	<p style="text-align: center;">Well Location</p> <p>Latitude: <u> 34 01' 16.8 N </u> Longitude: <u> 90 44' 50.0 W </u></p> <p>Method of Lat/Long (check one): <input type="checkbox"/> Conventional Survey, <input type="checkbox"/> USGS quad, <input checked="" type="checkbox"/> Hand-held GPS, <input type="checkbox"/> Survey-grade GPS</p> <p style="text-align: center;"><u> NW </u> ¼ <u> SW </u> ¼ Sec <u> 20 </u> T <u> 25 N </u> R <u> 5 W </u></p> <p>Distance Direction Nearest Town</p> <p style="text-align: center;"><u> 1 </u> Miles <u> South </u> of <u> Duncan </u></p>
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<p style="text-align: center;">Pump Type Check one</p> <p><input type="checkbox"/> Air Lift <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Bucket <input type="checkbox"/> Piston <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Centrifugal <input type="checkbox"/> Rotary <input type="checkbox"/> Flowing Well</p> <p>Other (specify): _____</p> <p>Date Pump Installed: <u> 04/18/2013 </u></p> <p>Rated Pump Capacity <u> 2500+/- </u> Gallons Per Minute</p>	<p style="text-align: center;">Power Type Check one</p> <p><input type="checkbox"/> Diesel Engine <input type="checkbox"/> Gasoline Engine <input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Electric Motor <input type="checkbox"/> Hand <input type="checkbox"/> Tractor PTO <input type="checkbox"/> Windmill <input type="checkbox"/> Other (specify): _____</p> <p>Horse Power Rating of Motor: <u> 60 </u></p> <p>Setting Depth: <u> 70 </u> feet</p> <p>Number of Stages: <u> 1 </u></p>
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<p style="text-align: center;">Pump Test Data</p> <p>Date Well Tested: _____</p> <p>Static Water Level (A): _____ Feet Below Land Surface</p> <p>Pumping Water Level (B): _____ Feet Below Land Surface</p> <p>Drawdown [(B) - (A)]: _____ Feet Below Land Surface</p> <p>Test Pumping Rate: _____ Gallons Per Minute</p> <p>Duration of Pump Test (minimum 4 hours): _____ hours</p>	<p style="text-align: center;">Method of Measuring Water Level Check one</p> <p><input type="checkbox"/> Air Line <input type="checkbox"/> Electric Measuring Line <input type="checkbox"/> Steel Tape</p> <p>Other (specify): _____</p> <p>For flowing well, measured shut in head: _____ feet</p> <p>Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping</p>
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This is for (check one): New Well Replacement of Existing Pump Repair of Existing Pump

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

<u> Patrick Chism </u> <u> 0695 </u> Print Name of Pump Installer and License No. (if applicable)	 Signature of Pump Installer
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Form: OLWR-SWR-10(07/09)



Google earth



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Dean A. Pennington, PhD
Executive Director
P. O. Box 129
Stoneville, MS 38776
Tel.: (662) 686-7712
Fax: (662) 686-9078
www.ymd.org

Yazoo Mississippi Delta Joint Water Management District

B188

March 13, 2013

Burroughs Farms
Buch Burroughs
84 Bourroughs Road
Shelby, MS 38774

RE: Well Construction / Authorization to drill

Permit No: GW-47111

Dear Mr. Bourroughs:

This authorization letter is for the construction of a new well that is to be drilled in the Mississippi River Valley Alluvial Aquifer. Your application has been received and is currently being processed.

**Location: NW1/4 of the SW1/4 Section 20 Township 25N Range 05W County Bolivar
Latitude: 34 01 29 Longitude: 90 44 50**

A copy of this notice or a water use permit **must be** attached to the State Well Report submitted by your driller. This report is a requirement of the State Well Drillers Regulation. A copy of this report **must** be mail or faxed to YMD Joint Water Management District.

All application must meet the **Mississippi Department of Environmental Quality** rules and regulations. If no adverse comments are received the application will then be presented to the Mississippi Department of Environmental Quality State Permit Board for approval.

If you have any questions please call our office at 662/686-7712.

Sincerely,

Dillard Melton Jr.
Dillard Melton Jr.
Permitting Director

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