

# 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 #: E 238  
Aquifer: \_\_\_\_\_  
E-Log #: \_\_\_\_\_

County: Bolivar  
Permit #: GW-50299  
Driller: Jonathan Gordon  
Date drilling completed: 3-28-19

*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 <i>(Landowner if borehole is not for a water well)</i>	Well or Borehole Location
Owner Name: <u>Ming Planting</u>	Latitude: <u>33° 55' 40"</u> Longitude: <u>90° 45' 40" W</u>
Mailing Address: <u>333 Hwy 32 W</u>	Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
<u>Shelby</u> MS <u>38774</u>	<u>NW 1/4 SW 1/4, Sec 18 T 24 R 05</u>
City State Zip Code	<u>1.64</u> Miles <u>S</u> of <u>Shelby</u>
Telephone No. (662) <u>719-7934</u>	(Distance) (Direction) (Nearest Town)

Well / Borehole Data	
Date drilling started: <u>3-28-19</u>	Date drilling completed: <u>3-28-19</u> Hole depth: <u>125'</u> Hole diameter: <u>26"</u>
Location of the source of any surface water used for drilling: <u>ditch nearby</u>	
Method of dosing and volume of Chlorine used in drilling and development: _____	
Logs run (circle all applicable): <input checked="" type="checkbox"/> No log run <input type="checkbox"/> Electric <input type="checkbox"/> Gamma Ray <input type="checkbox"/> Density <input type="checkbox"/> Sonic <input type="checkbox"/> Neutron <input type="checkbox"/> Other: _____	
Name of organization running log(s): _____	
Purpose of borehole (circle one): <input checked="" type="checkbox"/> Water Well <input type="checkbox"/> Geotechnical/Geological Investigation <input type="checkbox"/> Ground Source Heat Pump <input type="checkbox"/> Seismic Survey <input type="checkbox"/> Other (describe) _____	
<i>If drilling is not related to water well construction, skip the remainder of this block</i>	
Purpose of Well (circle all applicable): Home <input type="checkbox"/> Industrial <input type="checkbox"/> Public Supply <input type="checkbox"/> <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Fish Culture	
Other (describe): _____	
If a flowing well, method of flow regulation: Valve _____ Other (describe) _____	
Static Water Level: <u>43'</u> feet (above or below land surface (circle one)) Date measured: <u>3-29-19</u>	
Method of measurement (circle one): Steel tape <input type="checkbox"/> <input checked="" type="checkbox"/> Electric tape <input type="checkbox"/> Air line <input type="checkbox"/> Other (describe): _____	
Well depth: <u>125'</u> Well grouted to a depth of: <u>10</u> feet Type of grout (circle one): <input checked="" type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Mix	
Casing length: <u>75</u> feet Casing diameter: <u>16</u> inches Type of casing: <u>PVC</u>	
Screen length: <u>50</u> feet Screen diameter: <u>16</u> inches Type of screen: <u>PVC</u>	
Screen slot size: <u>.050</u> inches Setting depth: From <u>75</u> feet to <u>125</u> feet	
Type of completion (circle all applicable): <input checked="" type="checkbox"/> Gravel packed <input type="checkbox"/> Underreamed <input type="checkbox"/> Open hole <input type="checkbox"/> Natural Development	
Other (describe): _____	
Top of lap pipe or reduction in casing: <u>N/A</u> feet	
<i>If telescoped or more than one screen, describe on next page</i>	

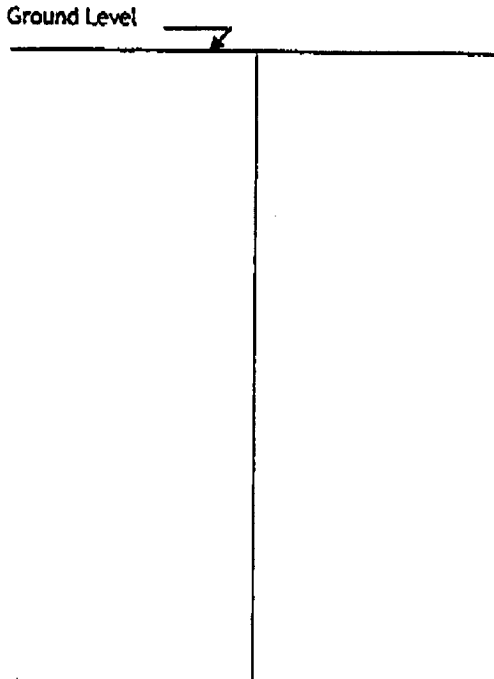
County: Bolivar  
Permit #: GW-50299

For Office Use Only:  
Well #: E-238

The sketch below only required for water wells

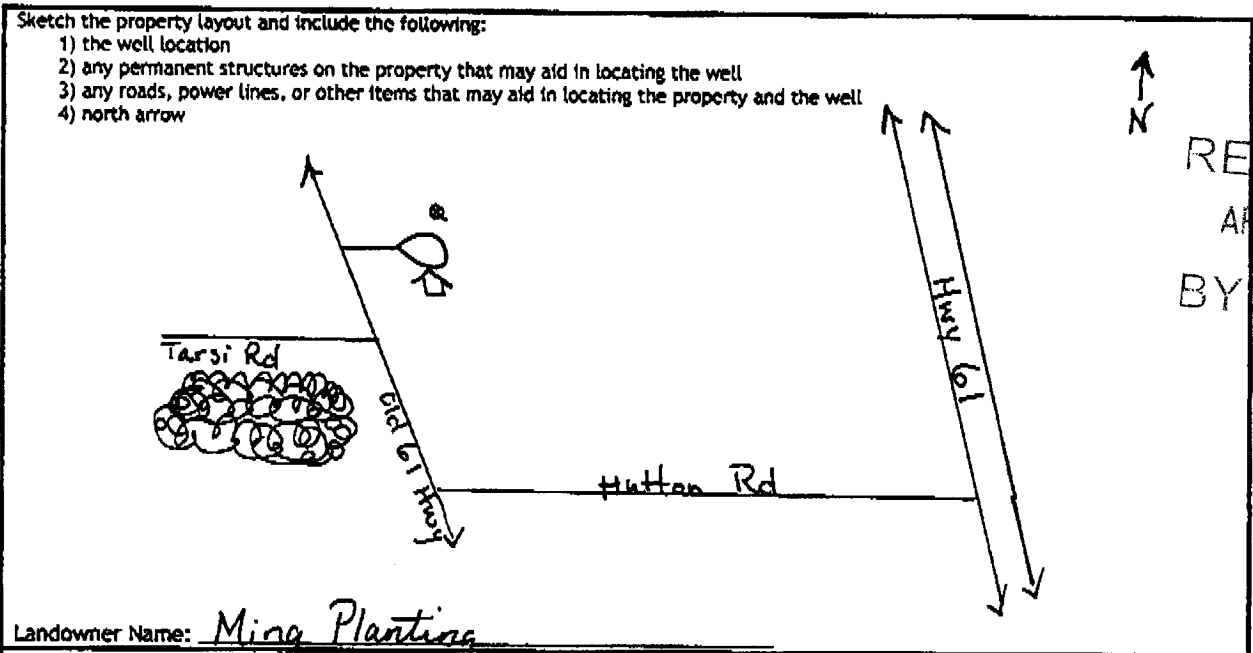
Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

If well telescopes, show depths on sketch.



Description of Formations Encountered	From (depth)	To (depth)
Top Soil + Clay	Ground level	15
Fine Sand	15	25
Medium Sand	25	35
Medium Sand	35	45
Coarse Sand + Gravel	45	55
Coarse Sand + Gravel	55	65
Coarse Sand + Gravel	65	75
Coarse Sand + Gravel	75	85
Coarse Sand + Gravel	85	95
Medium Sand	95	105
Coarse Sand	105	115
Coarse Sand + Gravel	115	125

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



Landowner Name: Ming Planting

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.

Peyton Overstreet 00008026 4-4-19 Peyton Overstreet  
Print Name of Responsible Licensee and License No. Date Signature of Licensee

### 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: Bolivar  
 Permit #: GW-50299  
 Driller: Jonathan Gordon  
 Date completed: 3-29-19  
*Copy information from block on Part 1*

**For Office Use Only:**  
 Well #: E235  
 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>Ming Planting</u>	Latitude: <u>33° 55' 40"</u> Longitude: <u>90° 45' 40"</u>
Mailing Address: <u>333 Hwy 32 W</u>	Method of Lat/Long (check one): Conventional Survey _____
<u>Shelby</u> <u>Ms</u> <u>38774</u>	USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
City State Zip Code	<u>NW</u> <u>1/4</u> <u>SW</u> <u>1/4</u> , Sec <u>18</u> T <u>24</u> R <u>05</u>
Telephone No. <u>(662) 719-7934</u>	<u>1.64</u> Miles <u>S</u> of <u>Shelby</u>
	(Distance) (Direction) (Nearest Town)

**Pump Type (circle one)**  
 Submersible  Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe): \_\_\_\_\_  
 Date Pump Installed: 3-29-19 Rated Pump Capacity: 1800 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: 40 Setting Depth: 70 feet Number of Stages: 2

**Pump Test Data for Non Flowing Well**  
 Date Well Tested: NOT TESTED Duration of Pump Test (minimum 4 hours): N/A hours  
 Static Water Level (A): 43' Feet Below Land Surface Pumping Water Level (B): N/A Feet Below Land Surface  
 Drawdown [(B) - (A)]: N/A Feet Below Land Surface Test Pumping Rate: N/A 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.  
Payton Overstreet 00008026 4-4-19 Payton Overstreet  
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer

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 BY OLWR

E.238

**STATE OF MISSISSIPPI**  
**Department of Environmental Quality**  
**Office of Land and Water Resources**  
**P. O. Box 2309**  
**Jackson, Mississippi 39225**

**PERMIT**

**TO DIVERT OR WITHDRAW FOR BENEFICIAL USE THE PUBLIC WATERS**

This permit is issued to the landowner named below in accordance with the provisions of the Mississippi Water Laws, Mississippi Code Sections 51-3-1, et seq. (1972, as amended), and the regulations and standards as promulgated thereunder. Whether or not specifically named in this permit or in the applications for this permit, anyone using water from the diversion/withdrawal point described below shall do so in compliance with the provisions of this permit. Neither this permit, nor any authority conferred hereby, may be sold, conveyed, encumbered, assigned, or otherwise aliened, for any period of time or under any conditions whatsoever. This permit may not be modified, transferred or revoked without prior action by the Permit Board. Any attempts to modify, transfer or revoke this permit, or to take any other action on this permit, shall be invalid and unenforceable and may result in immediate revocation or suspension of this permit. The holder of this permit shall at all times be responsible for adherence to the terms and conditions of this permit. No agreement between the permit holder and any other party shall affect the obligations and liabilities of the permit holder. Water use under this permit is allowed only when the streamflow, lake level elevation, or static groundwater level (whichever, if any, is applicable) is above the established minimum, pursuant to Mississippi Code Section 51-3-7. Authorization is hereby granted to divert/withdraw water for the beneficial use designated herein, and for no other purpose, subject to the following terms, conditions, and limitations:

**Permit Number:** MS-GW-50299

**Landowner Name:** MING, JEFF

**Landowner Address:** 333 HIGHWAY 32 WEST  
 SHELBY MS 38774

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**Source Of Water:** MISSISSIPPI RIVER VALLEY ALLUVIAL AQUIFER

**Beneficial Use:** IRRIGATION

**Diversion/Withdrawal Location:** NW 1/4 of the SW 1/4      **Section:** 18    **Township:** 24N    **Range:** 05W

**County:** BOLIVAR

**Quad:** SHELBY

**Maximum Volume:** 210 Acre-Feet/Year    *equivalent to* .1874 Million Gallons/Day

**Maximum Rate:** 2500 Gallons/Minute

**Applicant Name:** MING, JEFF

**Applicant Address:** 333 HIGHWAY 32 WEST  
 SHELBY MS 38774

**Date Permit Issued:** 03/01/2018

**Date Permit Expires:** 03/01/2023

**Date Permit Modified:**

**Date Permit Re-issued:**

This permit shall be deemed null and void if construction has not begun within one (1) year of permit issue date

**SPECIAL TERMS AND CONDITIONS:** WATER VOLUME MUST BE REDUCED BY AMOUNT OF WATER APPLIED TO THE SAME ACREAGE FROM OTHER PERMITTED POINTS.

**SPECIAL TERMS AND CONDITIONS 2:** SEE ATTACHMENT 1, WHICH IS HEREBY DECLARED TO BE PART OF THIS PERMIT.



Gary C. Rikard, Executive Director  
 Mississippi Department of Environmental Quality