

STATE WELL REPORT

Part I

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 #: F 293
 Aquifer: _____
 E-Log #: _____

County: Bolivar
 Permit #: G.W.-49199 ✓
 Driller: Clarence McMurtry
 Date drilling completed: 5-25-16

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>Charles Danna</u>	Latitude: <u>33° 51' 32.83"</u> Longitude: <u>90° 53' 39.09"</u>
Mailing Address: <u>228 Westwood Drive</u>	Method of Lat/Long (check one): Conventional Survey _____
<u>Cleveland</u> <u>MS</u> <u>38732</u>	USGS quad _____ Hand-held GPS <input checked="" type="checkbox"/> Survey-grade GPS _____
City State Zip Code	<u>S20</u> ^{SE} <u>1/4</u> <u>A1E</u> ^{NW} <u>1/4</u> , Sec. <u>11</u> T. <u>23N</u> R. <u>07E</u>
Telephone No. <u>(662) 721-8025</u>	<u>1.83</u> Miles <u>North</u> of <u>Jaymounds</u>
	(Distance) (Direction) (Nearest Town)

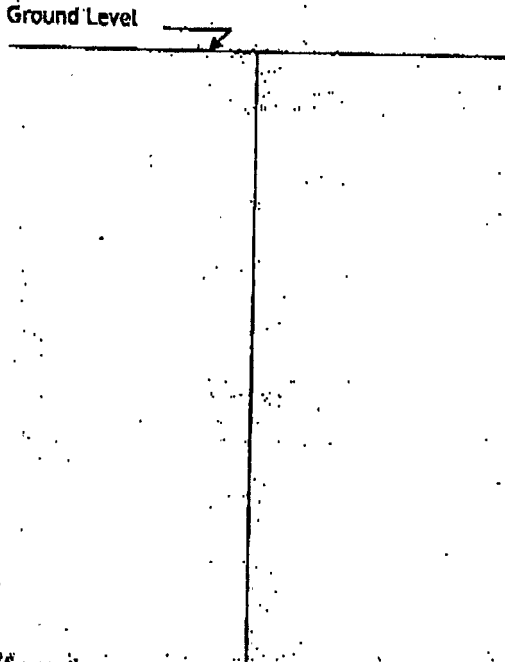
Well / Borehole Data	
Date drilling started: <u>5-25-16</u>	Date drilling completed: <u>5-25-16</u> Hole depth: <u>125'</u> Hole diameter: <u>26"</u>
Location of the source of any surface water used for drilling: <u>Hauled from nearby canal</u>	
Method of dosing and volume of Chlorine used in drilling 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	
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>35</u> feet (above or below) (circle one) and surface Date measured: <u>5-26-16</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>1050</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 49149

For Office Use Only:
Well #: F293

The sketch below only required for water wells

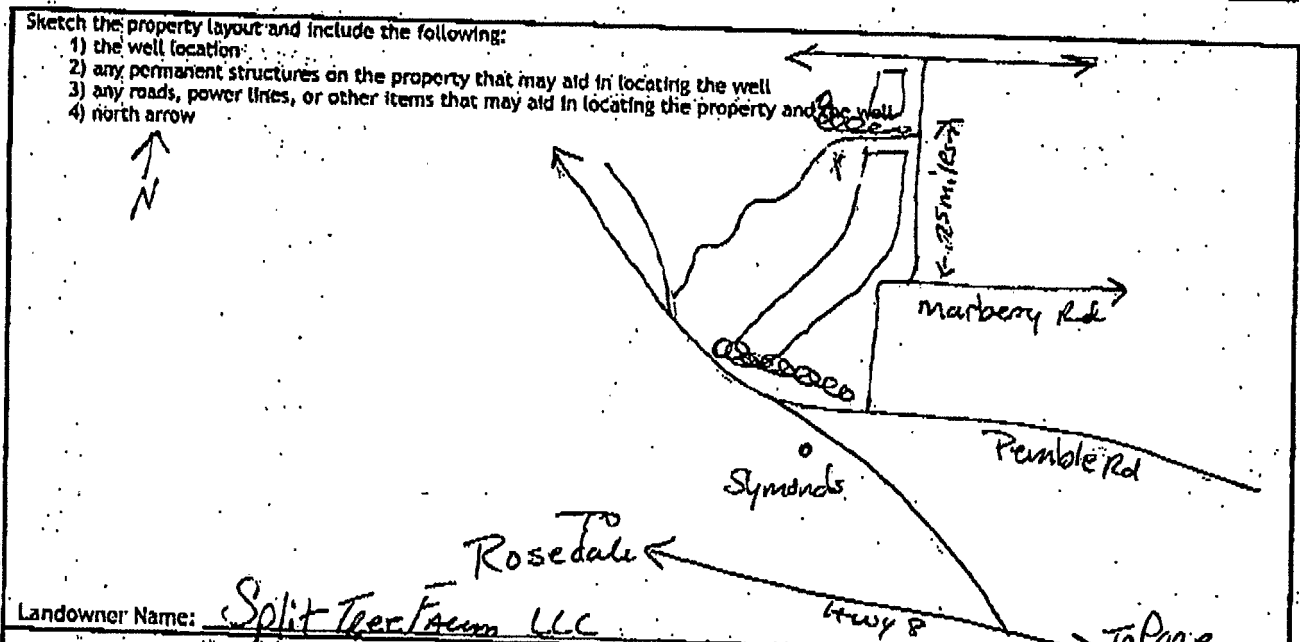
If well telescopes, show depths on sketch



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)
Clay	Ground level	17
Sand	17	25
Medium Sand & Clay	25	35
Fine Sand & Clay	35	55
Coarse Sand & Gravel	55	125

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



Landowner Name: Split Tree Farm LLC

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.

Clayton Miller 0-703
Print Name of Responsible Licensee and License No.

5-27-16
Date

Clayton Miller
Signature of Licensee

STATE WELL REPORT

County: Bolivar
 Permit #: GW-49149
 Driller: Scott Hood
 Date completed: 5-26-16
 Copy information from block on Part 1

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 #: F293
 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>Charles Danna</u>			Latitude: <u>33° 51' 32.83"</u> Longitude: <u>90° 55' 39.09"</u>		
Mailing Address: <u>228 Westwood Drive</u>			Method of Lat/Long (check one): Conventional Survey _____		
<u>Cleveland</u> City	<u>MS</u> State	<u>38732</u> Zip Code	USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____		
Telephone No. <u>(662) 221-8025</u>			<u>SW</u> ^{SE} <u>NE</u> ^{NW} <u>Sec 11</u> T. <u>23N</u> R. <u>07W</u> <u>1.83</u> Miles <u>North</u> of <u>Summers</u> (Distance) (Direction) (Nearest Town)		

Pump Type (circle one)
 Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe): _____
 Date Pump Installed: 5-26-16 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): BEAR DRIVE
 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): 35 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 N/A
 Measured shut in head: _____ feet.
 Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping

Meter Installation N/A
 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.
Clayton Miller 0-703 5-22-16 Clayton Miller
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer

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

F293

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-49149

Landowner Name: SPLIT TREE FARM LLC
Landowner Address: 469 DATTLE ROAD
ROSEDALE MS 38769

Source Of Water: MISSISSIPPI RIVER VALLEY ALLUVIAL AQUIFER

Beneficial Use: IRRIGATION

Diversion/Withdrawal Location: SW 1/4 of the NE 1/4 **Section:** 11 **Township:** 23N **Range:** 07W

County: BOLIVAR

Quad: BEULAH

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

Maximum Rate: 2400 Gallons/Minute

Applicant Name: SPLIT TREE FARM LLC

Applicant Address: 469 DATTLE ROAD
ROSEDALE MS 38769

Date Permit Issued: 10/28/2015

Date Permit Expires: 10/28/2020

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