

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 #: H222

Aquifer: _____

E-Log #: _____

County: Bolivar
 Permit #: MSGW-49644
 Driller: Willie Bryant
 Date drilling completed: 12-10-16

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.

<p>Well Owner Information (Landowner if borehole is not for a water well)</p> <p>Owner Name: <u>Michael + Terrance Warren</u> Mailing Address: <u>5435 Hwy 61</u></p> <p><u>Mound Bayou</u> MS <u>38762</u> City State Zip Code</p> <p>Telephone No. <u>(601) 719-0335</u></p>	<p>Well or Borehole Location</p> <p>Latitude: <u>33° 51.49' N</u> Longitude: <u>90° 43.26' W</u> <u>33-51-28</u> <u>90-43-16</u> Method of Lat/Long (check one): Conventional Survey _____</p> <p>USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/>, Survey-grade GPS _____</p> <p><u>SE</u> NE <u>SW</u> <u>SW</u> 1/4 NW 1/4 Sec <u>9</u> T <u>23N</u> R <u>5W</u></p> <p><u>2</u> Miles <u>SE</u> of <u>Mound Bayou MS</u> (Distance) (Direction) (Nearest Town)</p> <p style="text-align: center;"><u>South Lane Rd.</u></p>
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Well / Borehole Data

Date drilling started: 12-10-16 Date drilling completed: 12-10-16 Hole depth: 116' Hole diameter: 17"

Location of the source of any surface water used for drilling: Nearby ditch

Method of dosing and volume of Chlorine used in drilling and development: none

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

Name of organization running log(s): _____

Purpose of borehole (circle 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 (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: 42' feet (above or below) land surface Date measured: _____
(circle one)

Method of measurement (circle one): Steel tape Electric tape Air line Other (describe): Sonic water level meter

Well depth: 116 Well grouted to a depth of: 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 76 feet Casing diameter: 8 inches Type of casing: SCH 40 PVC

Screen length: 40 feet Screen diameter: 8 inches Type of screen: PVC slotted

Screen slot size: .032 inches Setting depth: From 76 feet to 116 feet

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

Other (describe): _____

Top of lap pipe or reduction in casing: -0- feet

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

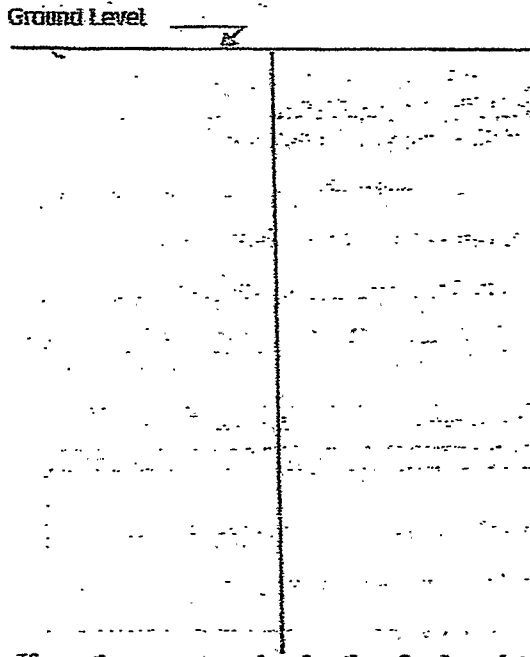
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County: Bolivar
Permit #: MS-6W-49644

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Well #: H222

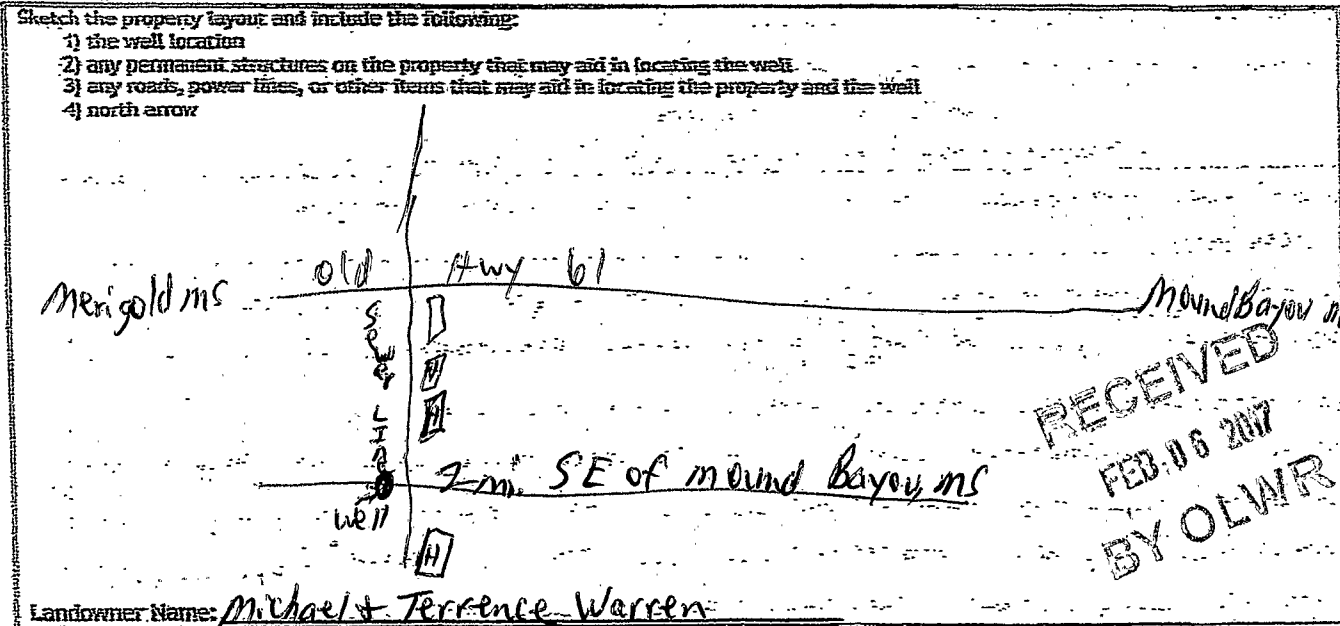
The sketch below only required for water wells
if well telescopes, show depths on sketch

Description of strata 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	25
Fine sand	25	32
Med. sand	32	45
Coarse sand & gravel	45	116

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



Landowner Name: Michael & Terrence Warren

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.

Willie L. Bryant 0-639 2-1-17 Willie L. Bryant
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 #: MS-6W-49644
 Driller: Willie Bryant
 Date completed: 12-11-16
 Copy information from block on Part 1

For Office Use Only:

Well #: H222
 Aquifer: _____

This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part I 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>Michael + Terrence Warren</u>			31-51-28 - Well Location <u>90-43-16</u>	
Mailing Address: <u>5435 Hwy 61</u>			Latitude: <u>33° 51.47' N</u> Longitude: <u>090° 43.26' W</u>	
_____			Method of Lat/Long (check one): Conventional Survey _____	
_____			USGS quad _____ Hand-held GPS <input checked="" type="checkbox"/> Survey-grade GPS _____	
<u>Mound Bayou</u>	<u>MS</u>	<u>38762</u>	SE $\frac{1}{4}$ NE $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ Sec <u>9</u> T <u>23N</u> R <u>5W</u>	
City	State	Zip Code	_____	
Telephone No. <u>(602) 719-0335</u>			<u>2</u> Miles <u>SE</u> of <u>Mound Bayou MS</u>	
_____			(Distance) (Direction) (Nearest Town)	
_____			<u>South Lane Rd.</u>	

Pump Type (circle one)

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

Date Pump Installed: 12-11-16 Rated Pump Capacity: 600 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: 15 Setting Depth: 80 feet Number of Stages: 1

Pump Test Data for Non Flowing Well

Date Well Tested: NO Power Yet Duration of Pump Test (minimum 4 hours): _____ hours

Static Water Level (A): 47' 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: _____

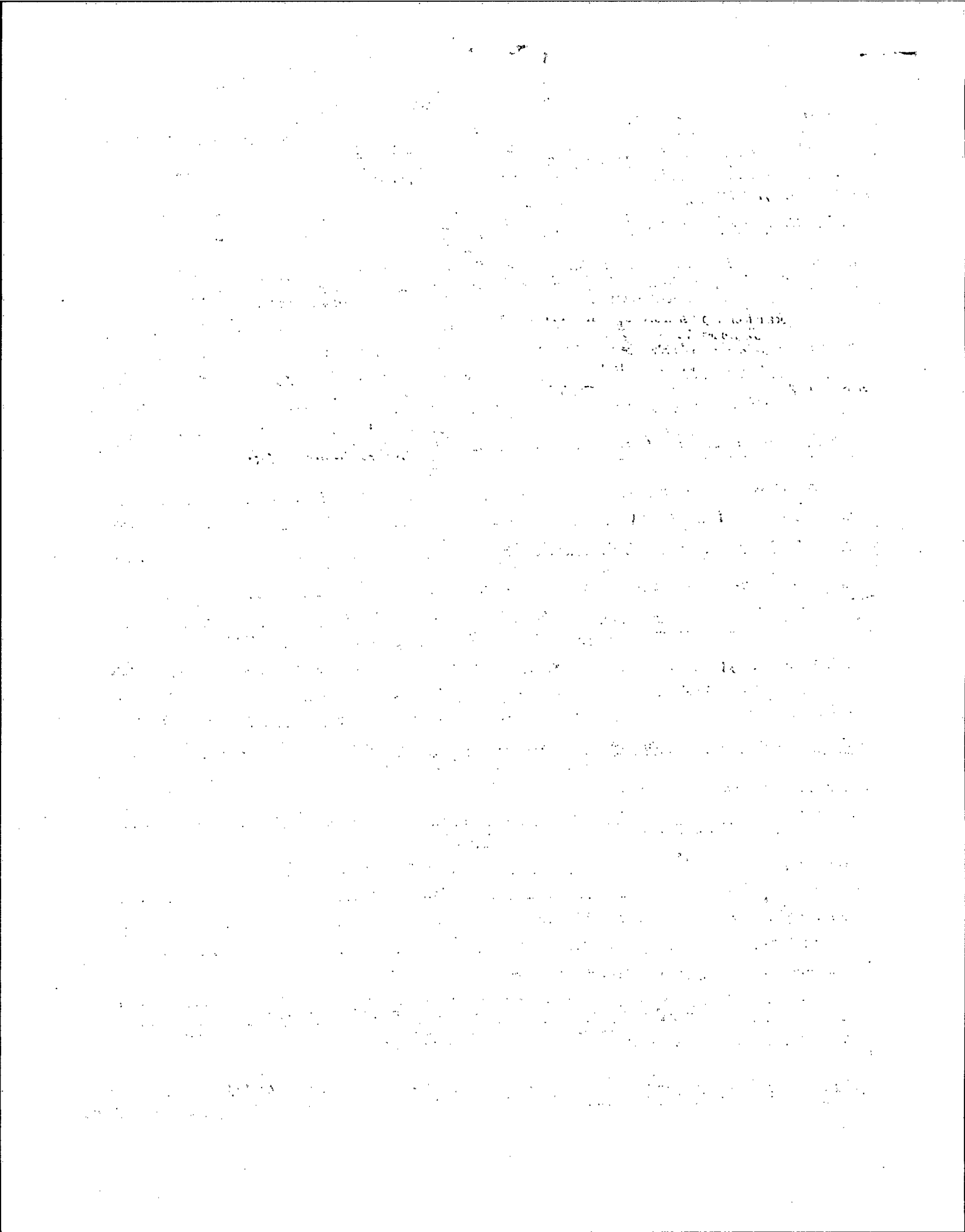
Is This Meter (circle one): New Repaired Replacement

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.

Willie L. Bryant 0-639 2-17 Willie L. Bryant
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer



4222

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-49644

Landowner Name: WARREN, MICHAEL AND TERRENCE
Landowner Address: 5435 HIGHWAY 61
MOUND BAYOU MS 38762

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Source Of Water: MISSISSIPPI RIVER VALLEY ALLUVIAL AQUIFER

Beneficial Use: IRRIGATION

Diversion/Withdrawal Location: SE 1/4 of the NW 1/4 **Section:** 09 **Township:** 23N **Range:** 05W

County: BOLIVAR

Quad: MERIGOLD

Maximum Volume: 60 Acre-Feet/Year *equivalent to* .0536 Million Gallons/Day

Maximum Rate: 800 Gallons/Minute

Applicant Name: WARREN, TERRENCE

Applicant Address: 5435 HIGHWAY 61
MOUND BAYOU MS 38762

Date Permit Issued: 09/15/2016

Date Permit Expires: 09/15/2021


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: SEE ATTACHMENT 1, WHICH IS HEREBY DECLARED TO BE PART OF THIS PERMIT.

SPECIAL TERMS AND CONDITIONS 2:


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