

State Well Report

Part 1 - Driller's Log

Mississippi Department of Environmental Quality
 Office of Land and Water Resources
 P.O. Box 10631
 Jackson, MS 39289-0631
 (601)961-5210
 (601)354-6938 (fax)

County: Coahoma
 Permit #: GW 44850
 Driller: Hillbush Youngs
 Date drilling completed: 6/12/11

For Office Use Only:
 Aquifer: MS River Alluvial
 Well #: B72
 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 (Landowner if borehole is not for a water well)	Well or Borehole Location
Owner Name: <u>Timber Massey</u>	Latitude: <u>34° 22' 08" N</u> Longitude: <u>90° 33' 39" W</u>
Mailing Address: <u>5 Bridge Street</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>
<u>Rich</u> <u>MS</u> <u>38617</u>	USGS quad, Hand-held GPS, Survey-grade GPS
City State Zip Code	<u>NW 1/4 SE 1/4 Sec 24 Twp 29 N Rng 04 W</u>
Telephone No. () _____	Distance Direction Nearest Town
	<u>1</u> Miles <u>W</u> of <u>Coahoma</u>

Well / Borehole Data

Date drilling started: 6/12/11 Date drilling completed: 6/12/11 Hole depth: 120 Hole diameter: 18"

Location of the source of any surface water used for drilling: Local Ditch

Method of dosing and volume of Chlorine used in drilling and development: N/A

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

Name of organization running log(s): NA

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

Seismic Survey _____ Other (describe) N/A

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 a flowing well, method of flow regulation: Valve NA Other (describe) _____

Static Water Level: 20 feet above or below (circle one) land surface Date measured: 6/12/11

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

Well depth: 120 Well grouted to a depth of 120 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 80 feet Casing diameter: 12 inches Type of casing: PVC

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

Screen slot size: 0.50 inches Setting depth: From 0 feet to 120 feet

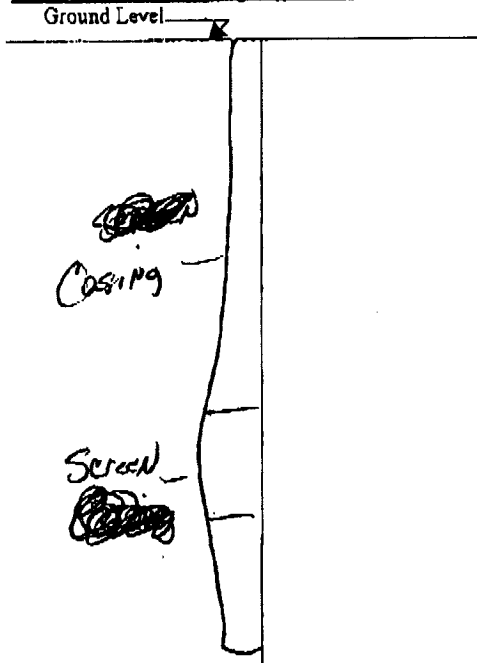
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development

Other (describe): _____

Top of lap pipe or reduction in casing: NA feet *If telescoped or more than one screen, describe on next page*

The sketch below only required for water wells

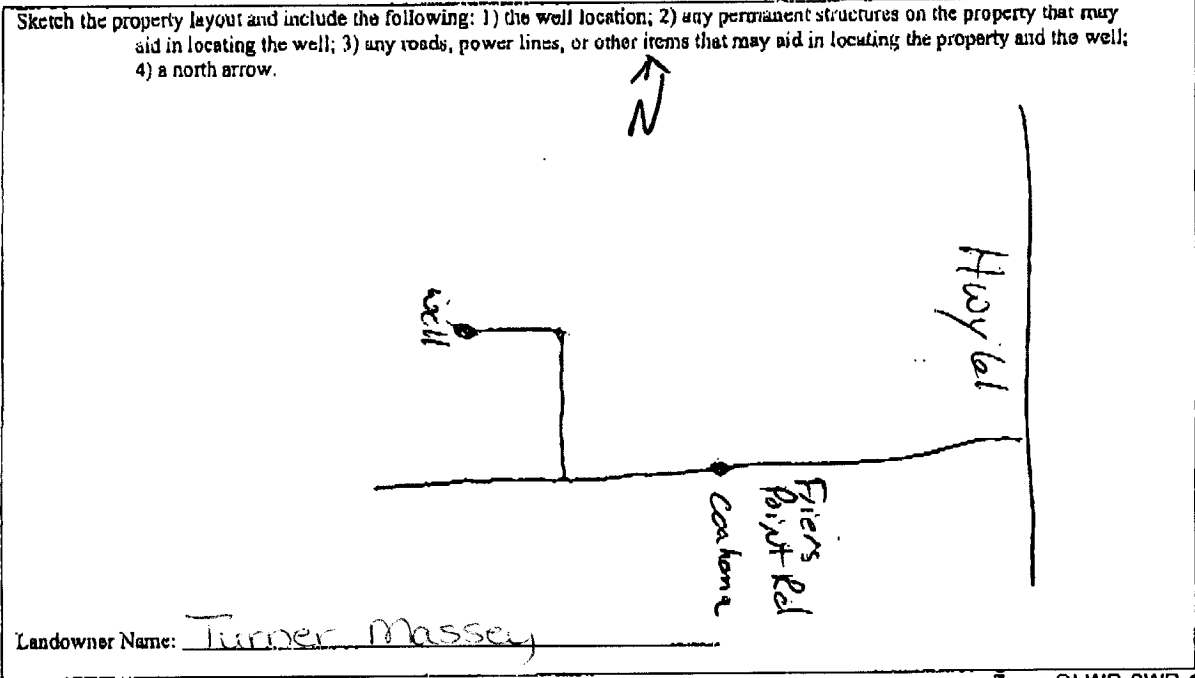
If well telescopes, show depths on sketch.



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)
Gumbo	Ground Level	28
Coarse sand	25	75
Coarse sand gravel	75	120

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



Form: OLWR-SWR-1A

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.

Will Young UWR 1995 6/12/11
Print Name of Responsible Licensee and License No. Date

Will Young
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 10631
 Jackson, MS 39289-0631
 (601)961-5210
 (601)354-6938 (fax)

County: Cahomra
 Permit #: G-W 44850
 Driller: Will Young
 Date completed: 6/12/11
Copy information from block on Part 1

For Office Use Only:

Aquifer: _____
 Well #: 372
 Elevation: _____

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>Turner Massey</u>	Latitude: <u>34 22 08</u> Longitude: <u>90 33 39</u>
Mailing Address: <u>3 BRIDGE STREET</u>	Method of Lat/Long (check one): Conventional Survey _____ <small>CA 23</small>
<u>Rich</u> <u>MS</u> <u>38617</u>	USGS quad <u>Hand-held GPS</u> Survey-grade GPS _____
City State Zip Code	<u>NW 1/4 SE 1/4 Sec 24 T 29 N R 04 W</u>
Telephone No. () _____	Distance Direction Nearest Town
	<u>1</u> Miles <u>W</u> of <u>Cahomra</u>

Pump Type Circle one	Power Type Circle one
Air Lift <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/>	<u>Diesel Engine</u> Gasoline Engine Natural Gas
Bucket <input type="checkbox"/> Piston <input type="checkbox"/> <u>Turbine</u> <input type="checkbox"/>	Electric Motor Hand Tractor PTO
Centrifugal <input type="checkbox"/> Rotary <input type="checkbox"/> Flowing Well <input type="checkbox"/>	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>30</u>
Date Pump Installed: <u>6/12/11</u>	Setting Depth: <u>60</u> feet
Rated Pump Capacity: <u>2500</u> Gallons Per Minute	Number of Stages: <u>3</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>6/12/11</u>	Air Line Electric Measuring Line <u>Steel Tape</u>
Static Water Level (A): <u>15</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>30</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown ((B) - (A)): <u>15</u> Feet Below Land Surface	Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping
Test Pumping Rate: <u>2500</u> Gallons Per Minute	
Duration of Pump Test (minimum 4 hours): <u>4</u> hours	

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

Will Young Will Young
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

2017/10/11
160 & Field

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

YMD
YAZOO Miss Delta -
Joint Water Meeting
PO Box 129
Stonewille, MS 38716
662-686-7117

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 on 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-44850

Landowner Name: MASSEY, TURNER

Landowner Address: 5 BRIDGE STREET
RICH

MS 38617

Source Of Water: MISSISSIPPI RIVER VALLEY ALLUVIAL AQUIFER

Beneficial Use: IRRIGATION

Diversion/Withdrawal Location: NW 1/4 of the SE 1/4

Section: 24 **Township:** 29N

Range: 04W

County: COAHOMA

Quad: COAHOMA

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

Maximum Rate: 2500 Gallons/Minute

Applicant Name: MASSEY, TURNER

Applicant Address: 5 BRIDGE STREET
RICH

MS 38617

Date Permit Issued: 01/06/2011

Date Permit Expires: 01/06/2021

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: NONE

Sam Mabry
Sam Mabry
Office Director