County	Desoto
_	#: M5-GW-49476
	Johnny Rocak Sr
Date dr	illing completed: 8-8-16

Top of lap pipe or reduction in casing:

# STATE WELL REPORT

Driller's Log

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225-2309

ackson, MS 39225-230 (601)961-5210 (601)360-0535 (fax)

For Office Use On	ly:
Well #: <u>£ 172</u>	_
Aquifer:	
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. Well Owner Information Well or Borehole Location (Landowner if borehole is not for a water well) Latitude: <u>N34° 5456</u> Longitude: <u>W90°/2'57</u> Method of Lat/Long (check one): Conventional Survey\_ USGS quad\_ Hand-held GPS I Telephone No. (Distance) Well / Borehole Data Date drilling started: 7-15-14 Date drilling completed: 7-15-14 Hole depth: 117'Location of the source of any surface water used for drilling: \_\_\_ Method of dosing and volume of Chlorine used in drilling and development: when f. II. 19 tan 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) feet [above or below] land surface Date measured: 7-15-Method of measurement (circle one): teel tape | Electric tape | Air line | Other (describe): Well grouted to a depth of: 10 feet Type of grout (circle one): Neat Cement (Bentonite) Mix Casing length: Casing diameter: inches Type of casing: Screen length: Screen diameter: \_ Type of screen: Setting depth: From feet to Type of completion (circle all applicable): Gravel packed Underreamed Open hole Natural Development Other (describe): . AUG 1 5 2016

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

Form: OI WR-SWR-1A (4/13)

County: DESD.	to
Permit #: <u>XIS~</u> G	

]	For	Oi	fice	Use	On	ly:	
Well #	: <u>l</u>		72	,		•	

The sketch	below	only	reauired and a second	for	water	wolle
			· columns ret	ıvı	mutei	WEILS

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		Description of Formations Encountered	From (depth)	To (depth)
		top soil	Ground level	15
	70'-11" pipe	Clay	15	45
		medium sand	45	55
V	20-11-11	Cogrse sand + gravel	5.5	82
	L	coarse sand	92	105
	20'-11 "	course sand taravel	105	115
	pi ·			
•				
	20'-11'			
•	30'032 Sercer			
	00 - 100			
	000 11			
	20'- 1050 11			
	,			
If more than one screen, show	w location of each on sketch			

sketch the	property	lavout and	include	the	following
4					· • • • • • • • • • • • • • • • • • • •

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) north arrow

Received

AUG 1 5 2016

I manda	Blythe	$\mathcal{D}_{a_{1}a_{2}}$	F		AUG 1 5 2016
Landowner Name:	4) 19710	mym	198MS		
I HEREBY CERTIFY requirements of the if applicable, and	is wizzizziooi neusitii	le was drilled, conent of Environm	onstructed, and constructed, and constructed a	ompleted in accordance wit the Mississippi Department	LY CLAAL
				<i>₽</i>	

Tom my Peacock 61 # 3409 8-12-16 Jonny Peacock.

Print Name of Responsible Licensee and License No. Date Signature of Licensee

Form: OLWR-SWR-1A (4/13)

### STATE WELL REPORT

## County: DESOTO Permit #: <u>GW- 49476</u> Driller: Tommi PEACOK SA

Date completed: 8-8-16 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 #: _	EITZ		
Aquifer: _			

	well contractor or a licensed pump installer. A copy of Part 1 epartment at the above address within 30 days of well completion.
Well Owner Information	Well Location
Owner Name: BLYTHE BAYOU FARMS	Latitude 34 · 54 · 55 'Longitude: 90 · 12 · 58 '
Mailing Address: 200 GREN VFLLMS	Method of Lat/Long (check one): Conventional Survey,
COVE	USGS quad, Hand-held GPS, Survey-grade GPS
HERNANOO MS 38632 City State Zip Code	NW 1/4 NW 1/4, Sec /3 T 025 R /OW
City State Zip Code	1.9 Miles N of LAKE CORMORANT
Telephone No. (901) 302-7570	(Distance) (Direction) (Nearest Town)
Pump Typ	pe (circle one)
	Jet Piston Rotary Other (describe):
Date Pump Installed: 8-10-16	Rated Pump Capacity: 2200Gallons Per Minute
Is This Pump (circle one): Repaired Replacemen	
	pe (circle one)
Electric Diesel Gasoline Natural Gas Tractor PTO Win	
Horse Power Rating of Motor: <u>60</u> Setting Dept	h;feet Number of Stages:
Pump Test Data	for Non Flowing Well
Date Well Tested:	Duration of Pump Test (minimum 4 hours): hours
Static Water Level (A): 26 Feet Below Land Surface	Pumping Water Level (B): Feet Below Land Surface
Drawdown [(B) - (A)]:Feet Below Land Sur	face Test Pumping Rate: Gallons Per Minute
Method of measurement (circle one): Steel tape Electric to	ape Air line Other (describe):
Pump Test Da	ta for Flowing Well
Measured shut in head:feet.	
Well yieldedGPM with a drawdown of	feet afterhours of pumping
Meter Meter	Installation
Meter Manufacturer: McComs k	
Meter Model Number/Name:	Type of Meter: <b>GROUND WATER</b>
Totalizer Register Unit and Multiplier Factor (AF x .001, ga	l x 1000, etc):
Installation Date: 8-10-16 Meter installed by:	CIPCLE S FREIGHTION
Is This Meter (circle one): New Repaired Replacem	ent Received
Important: By submitting the above information you are c For agricultural wells, a list of ap	ertifying that this meter was installed to manufacturer standards. Ply Coproved meters is on the MDEQ website.
I HEREBY CERTIFY that the above statements are true to the	AHC 1 7 2040
Print Name of Pump Installer and License No. (if applicable	Date Signature of Pump Installer
	Form: OI WR-SWR-1B (4/13)

# STATE OF MISSISSIPPI

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

16-0746

### 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-49476

Landowner Name: BLYTHE BAYOU FARMS

Landowner Address: 2100 GREEN VILLAGE COVE

**HERNANDO** 

MS 38632

Source Of Water: MISSISSIPPI RIVER VALLEY ALLUVIAL AQUIFER

Beneficial Use: IRRIGATION

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

Section: 13 Township:028

Range: 10W

County: DESOTO

Quad: LAKE CORMORANT

Maximum Volume: 202 Acre-Feet/Year

equivalent to .1803 Million Gallons/Day

Maximum Rate: 2500 Gallons/Minute Applicant Name: BLYTHE BAYOU FARMS

Applicant Address: 2100 GREEN VILLAGE COVE

HERNANDO

MS 38632

Date Permit Issued: 08/04/2016 Date Permit Expires: 08/04/2021

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:

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 Guality 16