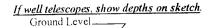
Ise Only: 3 with the <i>UVEY</i> ade GPS <i>R</i> OTE Town) r: 26
$\frac{3}{145}$
in the the ox
with the 0^{K} 145^{K} 14
with the 445 or 445 or 445 or 1445 or 145 or
145 urvey ade GPS R Town) r: 26
145 urvey ade GPS R Town) r: 26
145 urvey ade GPS R Town) r: 26
urvey ade GPS R Town) r: 26
urvey ade GPS R Town) r: 26
urvey ade GPS R Town) r: 2611
r: 26
r: 26 ¹¹
r: 26 ¹¹
r: 26 ¹¹
r: 26¹¹
r: 26¹¹
at Pump
<u>ſ</u>
BentoniteL_IA
feet
lopment

+1

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

Description of Formations Encountered	From (depth)	To (depth)
dirt 1	Ground Level	15
dict & sand,	16	25
dirt & spinal	20	35
SANd	36	45
SAnd/rock	46	55
SANDOCK	56	65
rock signa	66	75
DOLK SAND	76	85
mick signal	86	95
	96	105
	the second	10
	,	

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

Sketch the property layout and include the following: 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) a north arrow. 6 <u>5</u>. Landowner Name: Form: OLWR-SWR-1A (04/08)

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

11/12/10/ UnR-8243 HÞ

Signature of Licensee

Print Name of Responsible Licensee and License No.

Date

B63

211#2

STATE WELL REPORT	
ounty: 10 mes 50,240 Part 2	For Office Use Only:
Pump Installer's Completion Report	Well #: <u>363</u>
Driller: Ched Michtok Mississippi Department of Environmental Quality Office of Land and Water Resources	Well #:
Date completed: 5/7/18 P.O. Box 2309 Jackson, MS 39225-2309	Aquifer:
Copy information from block on Part 1 Generation from block on Part 1 Generation from block on Part 1 (601) 360-0535 (fax) (601) 360-0535 (fax) (601) 360-0535 (fax)	, , , , , , , , , , , , , , , , , , , ,
This part of the report must be completed by a licensed water well contractor or a licensed put of the report must be attached and both parts filed with the Department at the above address was the report must be attached and both parts filed with the Department at the above address was the second secon	villation of a company of the company
Well 0 wher information Well 1	ocation ngitude: <u>90 16 14 S</u>
Isiling Address: 1350 Billing Lang Method of Lat/Long (check one): Conventional Survey,
USGS guad . Hand-held G	PS_X, Survey-grade GPS
The la 20219 Mar 4 Star 14, Sec	23 TIM ROLE
City State Zip Code 4 Miles AF of	f <u>Crucer</u> (Narest Town)
elephone No. () (Direction)	(Nearest Town)
Pump Type (check one)	
ubmersible Turbine Air Lift Centrifugal Flowing Well Uet Piston Rotary Other (d	escribe):
Date Pump Installed: <u>57178</u> Rated Pump Capacity: <u>550</u>	Gallons Per Minute
s This Pump (check one): WNew Repaired Replacement	
Power Type (cneck Une)	
electric Diesel Gasoline Natural Gas Tractor PTO Windmill Other (describe):	1
Horse Power Rating of Motor: Setting Depth: feet Numbe	r of Stages:
Pump Test Data for Non Flowing Well	
	mum 4 hours):hours
Static Water Level (A): Feet Below Land Surface Pumping Water Level (B):	Feet Below Land Surface
	Gallons Per Minute
Method of measurement (check one): Steel tape Electric tape Air line Other (describe)	
Method of measurement (check bile). Steel table Electric tape Pump Test Data for Flowing Well	
Measured shut in head:feet.	
Well yieldedGPM with a drawdown of feet after	hours of pumping
Meter Installation	
Meter Manufacturer: Meter Serial Number:	
Meter Manufacturer: Type of Meter: Type of Meter:	
Meter Model Number/Name:	
Totalizer Register Unit and Multiplier Factor (AF X .001, gal X 1000, etc).	
Installation Date: Meter installed by:	
is This Meter (check one): New Repaired Replacement	11. 1 Container open derecto
Important: By submitting the above information you are certifying that this meter was in 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	not illate
Chul Ho Matter UNR-8243 12/118 (1)	nature of Pump Installer
Print Name of Pump Installer and License No. (<i>if applicable</i>) Date Sig	

•,•

B63

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 anended), 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 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-50240

Landowner Name: CEDAR HILL LP Landowner Address: 1250 BELLAIRE LANE ATLANTA GA 30319

Source Of Water: MISSISSIPPI RIVER VALLEY ALLUVIAL AQUIFER

Beneficial Use: IRRIGATION

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

Section: 26 Township:17N

Quad: CRUGER

Range: 01E

this w

County: HOLMES

Maximum Volume: 120 Acre-Feet/Year equivalent to .1071 Million Gallons/Day Maximum Rate: 2500 Gallons/Minute

Applicant Name: PARRISH, BRYANT Applicant Address: 28156 HIGHWAY 17

LEXINGTON MS 39095

Date Permit Issued: 11/29/2017 Date Permit Expires: 11/29/2022 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