

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)

County: Holmes
 Permit #: GW-50833
 Driller: CHAD MATTOX
 Date drilling completed: 10/24/19

For Office Use Only:
 Well #: B 66
 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 (Landowner if borehole is not for a water well) Owner Name: <u>Betty Killibrew</u> Mailing Address: <u>607 E. Park Ave</u> <u>Greenwood</u> <u>MS</u> <u>38930</u> City State Zip Code Telephone No. (____) _____			Well or Borehole Location Latitude: <u>33.301185</u> Longitude: <u>-90.161798</u> Method of Lat/Long (check one): Conventional Survey <input type="radio"/> , USGS quad <input type="radio"/> , Hand-held GPS <input checked="" type="radio"/> , Survey-grade GPS <input type="radio"/> <u>NW</u> ¼ <u>NE</u> ¼, Sec <u>35</u> T <u>17N</u> R <u>1E</u> _____ Miles _____ of _____ (Distance) (Direction) (Nearest Town)		
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Well / Borehole Data
 Date drilling started: 10/24/19 Date drilling completed: 10/24/19 Hole depth: 95 Hole diameter: 24
 Location of the source of any surface water used for drilling: _____
 Method of dosing and volume of Chlorine used in drilling and development: _____
 Logs run (check 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 (check 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: 6 feet above / below land surface Date measured: 10/24/19
 (select one)
 Method of measurement (select one): Steel tape Electric tape Air line Other (describe): _____
 Well depth: 95 Well grouted to a depth of: 10 feet Type of grout (select one): Neat Cement Bentonite Mix
 Casing length: 55 feet Casing diameter: 16 inches Type of casing: PVC
 Screen length: 40 feet Screen diameter: 16 inches Type of screen: PVC
 Screen slot size: .032 inches Setting depth: From 55 feet to 95 feet
 Type of completion (check all applicable): Gravel packed Underreamed Open hole Natural Development
 Other (describe): _____
 Top of lap pipe or reduction in casing: _____ feet
If telescoped or more than one screen, describe on next page

County: Holmes
 Permit #: GW-50833



For Office Use Only:
 Well #: _____

The sketch below only required for water wells

If well telescopes, show depths on sketch.

Ground Level <u> </u>	
CASING	20
CASING	40
CASING	55
SCREEN	75
SCREEN	95

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)	
	Ground level	10
CLAY	10	20
FINE SAND	20	30
MED SAND	30	40
MED SAND, GRAVEL AND PEA GRAVEL	40	50
MED SAND, GRAVEL AND PEA GRAVEL	50	60
MED SAND, GRAVEL AND PEA GRAVEL	60	70
MED SAND, GRAVEL AND PEA GRAVEL	70	80
CLAY	80	90
CLAY	90	95
	100	110
	110	120

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) north arrow

Landowner Name: _____

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.

CHAD MATTOX UNR 8243
 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)

For Office Use Only:

Well #: BGG
Aquifer:

County: Holmes
Permit #: GW-50833
Driller: CHAD MATTOX
Date completed: 11/15/19
Copy information from block on Part 1

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: Betty Killibrew, 607 E. Park Ave, Greenwood MS 38930
Well Location: Latitude: 33.301185, Longitude: -90.161798
Method of Lat/Long: Conventional Survey
USGS quad: NW 1/4 NE 1/4, Sec 35 T 17N R 1E

Pump Type (select one): Submersible
Date Pump Installed: 11/15/19
Rated Pump Capacity: 1200 Gallons Per Minute
Is This Pump (select one): New

Power Type (select one): Electric
Horse Power Rating of Motor: 100
Setting Depth: 60 feet
Number of Stages: 3

Pump Test Data for Non Flowing Well
Date Well Tested:
Duration of Pump Test (minimum 4 hours):
Static Water Level (A): 6 Feet Below Land Surface
Pumping Water Level (B):
Drawdown [(B) - (A)]:
Test Pumping Rate:
Method of measurement (select one): Steel tape

Pump Test Data for Flowing Well
Measured shut in head:
Well yielded GPM with a drawdown of feet after hours of pumping

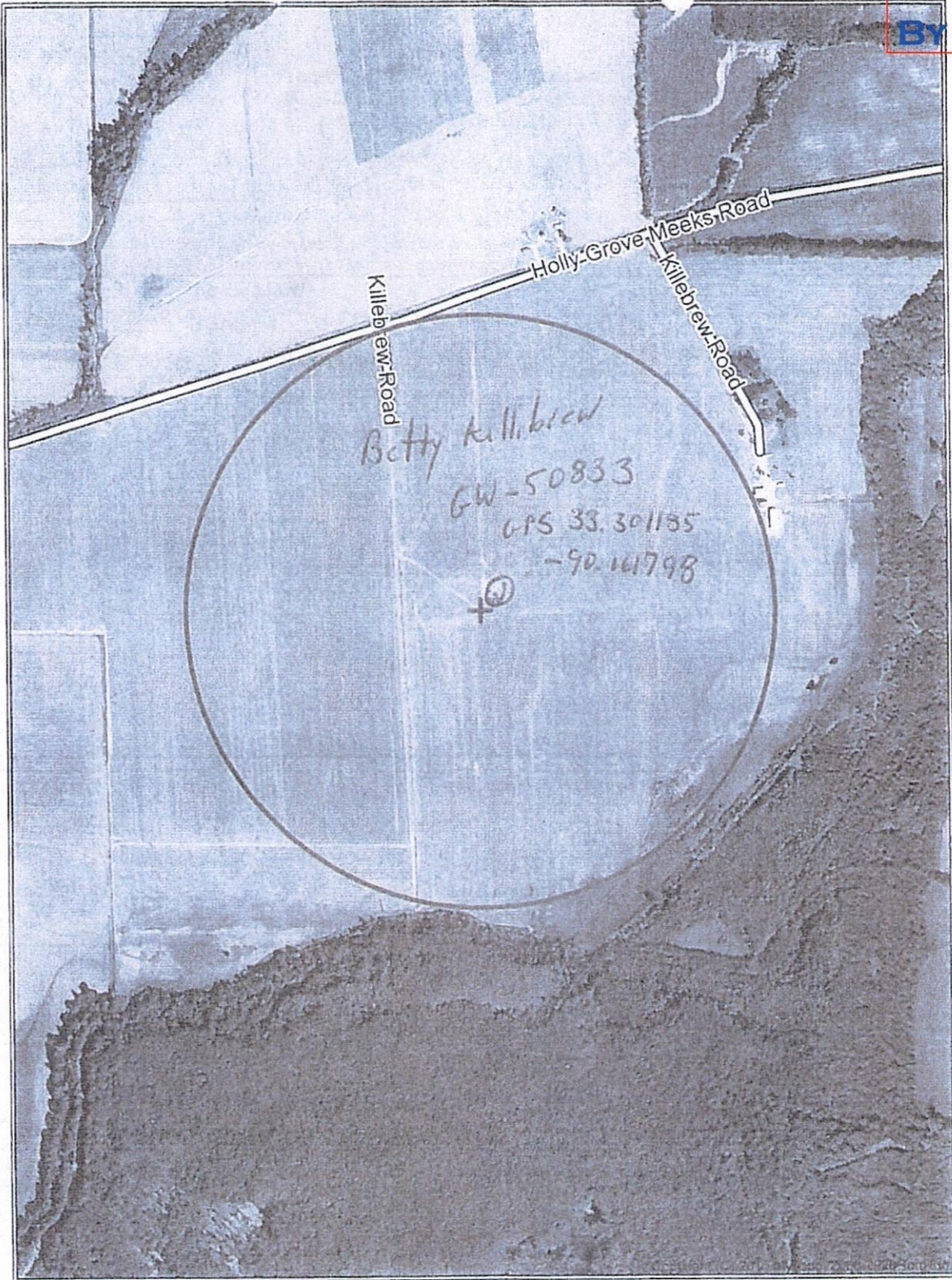
Meter Installation
Meter Manufacturer:
Meter Serial Number:
Meter Model Number/Name:
Type of Meter:
Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):
Installation Date:
Meter installed by:
Is This Meter (circle one): New
Important: By submitting the above information you are 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.
David P. Holt 0-752P
Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer

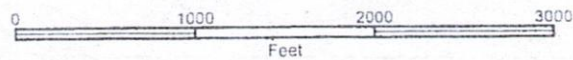
RECEIVED

04-16-2020

BY OLWR



SCALE 1:12000



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 or lake level elevation (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-50833 **Total Permitted Acreage:** 440

Landowner Name: KILLEBREW, BETTY
Landowner Address: 607 EAST PARK AVENUE
GREENWOOD, MS 38930

Source of Water: MISSISSIPPI RIVER VALLEY ALLUVIAL AQUIFER

Beneficial Use(s): IRRIGATION

Diversion/Withdrawal Location: SW 1/4 of the SE 1/4 **Section:** 26 **Township:** 17N **Range:** 01E

County: HOLMES **Quad:** CRUGER

Permitted Acreage: Irrigation: 440 **Fish Culture:** 0 **Wildlife Management:** 0

Maximum Volume: See Special Terms And Conditions (attachment I)

Applicant Name: CHENOAH PLANTING COMPANY
Applicant Address: 568 CHENOAH HILL LANE
TCHULA, MS 39169

Date Permit Issued: 07/01/2019

Date Permit Expires: 07/01/2024

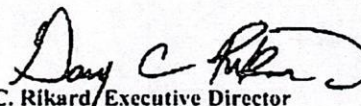
Date Permit Modified:

Date Permit Reissued:

This permit shall be deemed null and void if construction has not begun within one (1) year of the permit issue date.

SPECIAL TERMS AND CONDITIONS 1:

See Attachment I which is hereby declared part of this permit.


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