County:	Holmes	
i	GW-47802	!
Driller: Irrigation Equipment		
Date drill	ing completed:	09/17/2013

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 #:	K156	
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 comp	pletion of drilling of the well or borehole.
Well Owner Information (Landowner if borehole is not for a water well)	Well or Borehole Location
Owner Name: J M Howard Estate	Latitude: 33 08-59.7 N Longitude: 90 13' 17.5 W
Mailing Address: 904 Medallion Drive	C ↑ C ← Method of Lat/Long (check one): ☐ Conventional Survey,
	☐ USGS quad, ☑ Hand-held GPS, ☐ Survey-grade GPS
Greenwood Ms 38930	NW 1/4 NW 1/4, Sec 20 T 15 N R 1 E
City State Zip code	
Telephone No. (662) 453-2522	2 Miles South of Tchula (Distance) (Direction) (Nearest Town)
Well / Bor	ehole Data
Date drilling started: 09/17/2013 Date drilling completed: 0	09/17/2013 Hole depth: 120 Hole diameter: 24"
Method of dosing and volume of Chlorine used in drilling and deve	elopment: 50 PPM
Logs run (check all applicable): ☑ No log run ☐ Electric ☐ Gami	
	ma kay Density Sonic Neutron Other:
Name of organization running log(s):	
Purpose of borehole (check one): Water Well Geotech	nical/Geological Investigation
☐ Seismic Survey ☐ 0	Other (describe)
If drilling is not related to water well con	struction, skip the remainder of this block
Purpose of Well <i>(check all applicable)</i> : ☐ Home ☐ Industrial ☐ Pi ☑ Other <i>(describe)</i> :	ubilic Supply ⊠ Imgation □ Fish Culture
If a flowing well, method of flow regulation: Valve	Other (describe)
Static Water Level: 28' feet [□ above or ⊠ below (check one)	v) land surface Date measured: 10/01/2013
Method of Measurement (check one) 🛭 Steel tape 🗌 Electric tap	e
Well depth: 120 Well grouted to a depth of: 10 feet	Type of grout (check one): ☐ Neat Cement ☑ Bentonite ☐ Mix
Casing length: <u>88 66</u> feet Casing diameter: <u>16</u>	inches Type of casing: PVC
Screen length: 32 feet Screen diameter: 16	inches Type of screen: PVC
Screen slot size: .032 inches Setting depth:	From
Type of completion (check all applicable): ☑ Gravel packed ☐ Ur	nderreamed 🗌 Open hole 🔲 Natural Development
☐ Other (describe):	
Top of lap pipe or reduction in casing: Feet	- 1985년 - 1985 - 1985년 - 1985
If telescoped or more than one	e screen, describe on next page

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

		For Office Us	•
County: Holmes		Well#: <u>K15</u>	6
Permit #: GW-47802			
		<u> </u>	
The sketch below only required for water wells		countered must be provided for	or all wells
If well telescopes, show depths on sketch.	and borenoles, unless specific	cally exempted by regulations	
Ground level	Description of Formations E		
Ground level	Fine Sand & Clay	Ground lev	
	Clay	13	37
	Fine Sand & Gravel	38	44
	Clay	45	60
	Fine Sand & Gravel	61	66
	Medium Sand & Gra	· · · · · · · · · · · · · · · · · · ·	99
	Fine Sand	100	104
	Medium Sand & Gra		112
	Fine Sand	113	120
	Blanked 20' on botto	om	
If more than one screen, show location of each on ske	tch		1
Sketch the property layout and include the follow 1) the well location 2) any permanent structures on the property 3) any roads, power lines, or other items that 4) a north arrow	y that may aid in locating the well	ne well	
		Bank Common Comm	
		ř.,	
Landowner Name: J M Howard Estate I HEREBY CERTIFY that the well/borehole was defined by the control of the co	drilled, constructed, and complete in ac	Form: OLW	R-SWR-1A (04/08)
requirements of the Mississippi Department of En if applicable, and state laws.	nvironmental Quality and the Miss ssippi	Department of Health regul	ations,
Patrick Chism 0695 Print Name of Responsible Licensee and License	10/29/2013 e No. Date	Signature of Licensee	
and of trooponoisic clochace and License	C.110. Date	Signature of Licensee	

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

County:	Holmes	
Permit #:	GW-47802	
Driller: Irrigation Equipment		
Date drilling completed: 09/17/2013		

Copy information from block on Part 1

Well Owner Information

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:	
/Veli#:	15156
Aquifer:	

Well Location

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.

Owner Name: J M Howard Estate	Latitude: 33 08' 59.7 N Longitude: 90 13' 17.5 W
Mailing Address: 904 Medallion Drive	Method of Lat/Long (check one): Conventional Survey,
	☐ USGS quad, ☑ Hand-held GPS, ☐ Survey-grade GPS
Greenwood Ms 38930	NW 1/4 NW 1/4, Sec 20 T 15 N R 1 E
City State Zip code	1117 7 1117 74, 000 <u>20</u> 1 10 11 11 <u>1 12</u>
Telephone No. () -	2 Miles South of Tchula (Direction) (Nearest Town)
Pump Typ	pe (check one)
☐ Submersible ☑ Turbine ☐ Air Lift ☐ Centrifugal ☐ Flowing V	Nell ☐ Jet ☐ Piston ☐ Rotary ☐ Other (describe):
Date Pump Installed 10/01/2013	Rated Pump Capacity: 2500+/- Gallons Per Minute
Is This Pump (check one): ☐ New ☒ Repaired ☐ Replacement	
Power Typ	pe (check one)
☐ Electric ☑ Diesel ☐ Gasoline ☐ Natural Gas ☐ Tractor PTO	O ☐ Windmill ☐ Other (describe):
Horse Power Rating of Motor: 60 Setting Depth:	70 feet Number of Stages: 1
Pump Test Data (for Non Flowing Well
Date Well Tested:	Duration of Pump Test (minimum 4 hours): Hours
	Pumping Water Level (B): Feet Below Land Surface
	ace Test Pumping Rate: Gallons Per Minute
Method of measurement (check one): ☐ Steel tape ☐ Electric ta	
•	ta for Flowing Well
Measured shut in head: Feet	
Well yielded GPM with a drawdown of	feet after hours of pumping
Meter I	Installation
Meter Manufacturer: None Installed	
	Type of Meter:
	00, etc):
Is This Meter (check one): New Repaired Replacement	l e e e e e e e e e e e e e e e e e e e
	rtifying that this meter was installed to manufacturer standards. proved meters is on the MDEQ website.
I HEREBY CERTIFY that the above statements are true to the b	pest of my knowledge.
Patrick Chism 0695	10/29/2013
Print Name of Pump Installer and License No. (if applicable)	Date Signature of Pump Installer
	Form: OLWR-SWR-1B (4/13)
	The COAM
Farm manifold for Farms On & Distr. 044-040-0400. FarmsOn & Distr.	