County:	Humphreys		
Permit #:	GW-48971		
Driller:	Irrigation Equipment Inc.		
Date drill	ing completed:	06/22/2015	

From marriad de France On & Distr. 044 040 0400. Pamerom & Distr. ----

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 Well#:	r Office Use Only: ビネイフ
Aquifer:	
E-Log #:	

Department at the above address within 30 days of con Well Owner Information	Well or Borehole Location		
(Landowner if borehole is not for a water well)	333. 3. 23/2/10/2 23/2/10/3		
Owner Name: Mitchell Pearson	Latitude: 33 09' 04.3 N Longitude: 90 35' 37.7 W		
Mailing Address: 506 Shakey Street	Method of Lat/Long (check one): Conventional Survey,		
	☐ USGS quad, ☑ Hand-held GPS, ☐ Survey-grade GPS		
Belzoni Ms 39038	NE 1/4 NE 1/4, Sec 15 T 15 N R 4 W		
City State Zip code			
Telephone No. (662) 836-7879	6 Miles Southwest of Belzoni (Distance) (Direction) (Nearest Town)		
Well / B	Sorehole Data		
Date drilling started: 06/22/2015 Date drilling completed:	06/22/2015 Hole depth: 127' Hole diameter: 24"		
Location of the source of any surface water used for drilling:	Surface Water		
Method of dosing and volume of Chlorine used in drilling and de	evelopment: 50 PPM		
· ·			
Logs run (check all applicable): ☑ No log run ☐ Electric ☐ Ga	ımma Ray ∐ Density ∐ Sonic ∐ Neutron ∐ Other:		
Name of organization running log(s):			
Purpose of borehole (check one):	schnical/Geological Investigation		
	echnical/Geological Investigation		
☐ Seismic Survey	Other (describe)		
☐ Seismic Survey	_		
Seismic Survey	Other (describe) onstruction, skip the remainder of this block		
☐ Seismic Survey ☐ If drilling is not related to water well co Purpose of Well (check all applicable): ☐ Home ☐ Industrial ☐	Other (describe) onstruction, skip the remainder of this block		
☐ Seismic Survey If drilling is not related to water well continued to water well continued to the series of Well (check all applicable): ☐ Home ☐ Industrial ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	Other (describe) onstruction, skip the remainder of this block Public Supply □ Irrigation ☒ Fish Culture		
☐ Seismic Survey ☐ If drilling is not related to water well co Purpose of Well (check all applicable): ☐ Home ☐ Industrial ☐ Other (describe): Replace GW-07853	Other (describe) onstruction, skip the remainder of this block Public Supply □ Irrigation ☒ Fish Culture		
☐ Seismic Survey If drilling is not related to water well continued to water well continued to water well continued to water well continued to the continued	Other (describe) onstruction, skip the remainder of this block Public Supply □ Irrigation ☒ Fish Culture Other (describe)		
☐ Seismic Survey If drilling is not related to water well converged by the seismic Survey Purpose of Well (check all applicable): ☐ Home ☐ Industrial ☐ Other (describe): Replace GW-07853 If a flowing well, method of flow regulation: Valve Static Water Level: 30' feet [☐ above or ☑ be (check one)	Other (describe) onstruction, skip the remainder of this block Public Supply Irrigation Series Fish Culture Other (describe) clow] land surface Date measured: 06/22/2015		
☐ Seismic Survey If drilling is not related to water well compared	Other (describe) onstruction, skip the remainder of this block Public Supply Irrigation Series Fish Culture Other (describe) clow] land surface Date measured: 06/22/2015		
Seismic Survey	Other (describe)		
Seismic Survey	Other (describe) onstruction, skip the remainder of this block I Public Supply □ Irrigation ☒ Fish Culture Other (describe) elow] land surface Date measured: 06/22/2015 tape □ Air line □ Other: (describe) eet Type of grout (check one): □ Neat Cement ☒ Bentonite □ Mid 6" inches Type of casing: PVC		
Seismic Survey	Other (describe) onstruction, skip the remainder of this block I Public Supply □ Irrigation ☒ Fish Culture Other (describe) elow] land surface Date measured: 06/22/2015 tape □ Air line □ Other: (describe) eet Type of grout (check one): □ Neat Cement ☒ Bentonite □ Mi 6" inches Type of casing: PVC 6" inches Type of screen: PVC		
Seismic Survey	Other (describe) onstruction, skip the remainder of this block I Public Supply □ Irrigation ☒ Fish Culture Other (describe) elow] land surface Date measured: 06/22/2015 tape □ Air line □ Other: (describe) eet Type of grout (check one): □ Neat Cement ☒ Bentonite □ Mi 6" inches Type of casing: PVC 6" inches Type of screen: PVC th: From —88' ☒ feet to 127' feet		
Seismic Survey	Other (describe) onstruction, skip the remainder of this block I Public Supply □ Irrigation ☒ Fish Culture Other (describe) elow] land surface Date measured: 06/22/2015 tape □ Air line □ Other: (describe) eet Type of grout (check one): □ Neat Cement ☒ Bentonite □ Mi 6" inches Type of casing: PVC 6" inches Type of screen: PVC th: From —88' ☒ feet to 127' feet		
Seismic Survey	Other (describe) onstruction, skip the remainder of this block I Public Supply □ Irrigation ☒ Fish Culture Other (describe) elow] land surface Date measured: 06/22/2015 tape □ Air line □ Other: (describe) eet Type of grout (check one): □ Neat Cement ☒ Bentonite □ Mi 6" inches Type of casing: PVC 6" inches Type of screen: PVC th: From —88' ☒ feet to 127' feet		

			For Office Use 6	Only:
County: Humphreys	<u> </u>	Well#	E 247	
Permit #: GW-4897	1	<u> </u>		
The sketch below only req	uired for water wells	Description of formations encountered		ll wells
If well telescopes, show de	epths on sketch.	and boreholes, unless specifically exen	upted by regulations	
Ground level —		Description of Formations Encounter		To (depth)
		Clay	Ground level	67
		Fine Sand Fine Sand & Gravel	68	73
		Medium Sand & Gravel	74	127
		Medium Sand & Graver	14	121
				
				<u>†</u>
				
				
		-		
If more than one screen	, show location of each on sketch		•	
the well locati any permaner	nt structures on the property that n ower lines, or other items that may	nay aid in locating the well aid in locating the property and the well		
			HECE	Some Section of the Control of the C
			AL IN X	
Landowner Name:	Mitchell Pearson		84.00	
requirements of the M if applicable, and state	lississippi Department of Environn	constructed, and completed in accordance nental Quality and the Mississippi Departmental Quality and Mississippi Depart	Form: OLWR-Se with all applicable part of Health regulation	` ,
Patrick Chism	0695	07/08/2015		

Date

Print Name of Responsible Licensee and License No.

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

Signature of Licensee

County: Humphreys Permit #: GW-48971 Driffer: Irrigation Equipment Inc.

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:		
Weil#:	£247	
Aquifer:		

Date drilling completed: 06/22/2015

Copy information from block on Part 1

Patrick Chism

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

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: Mitchell Pearson Latitude: 33 09' 04.3 N Longitude: 90 35' 37.7 W Mailing Address: 506 Sharkey Street Method of Lat/Long (check one):

Conventional Survey, ☐ USGS quad, ☑ Hand-held GPS, ☐ Survey-grade GPS 39038 Belzoni Ms NE 1/4 NE 1/4, Sec 15 T 15 N R 4 W Citv State Zip code (662) 836-7879 Miles Southwest of Telephone No. (Nearest Town) (Distance) (Direction) Pump Type (check one) □ Submersible ☑ Turbine □ Air Lift □ Centrifugal □ Flowing Well □ Jet □ Piston □ Rotary □ Other (describe): Date Pump Installed 06/23/2015 Rated Pump Capacity: 2300+/- Gallons Per Minute Is This Pump (check one): ☑ New ☐ Repaired ☐ Replacement Power Type (check one) ☑ Electric ☐ Diesel ☐ Gasoline ☐ Natural Gas ☐ Tractor PTO ☐ Windmill ☐ Other (describe): Horse Power Rating of Motor: 60 Setting Depth: 70' feet Number of Stages: 2 Pump Test Data for Non Flowing Well Date Well Tested: Duration of Pump Test (minimum 4 hours): Static Water Level (A): _____ Feet Below Land Surface Pumping Water Level (B): ____ Feet Below Land Surface Drawdown [(B) - (A)]: __ Feet Below Land Surface Test Pumping Rate: ___ Gallons Per Minute Method of measurement (check one): ☐ Steel tape ☐ Electric tape ☐ Air line ☐ Other (describe): **Pump Test Data for Flowing Well** Measured shut in head: _____ Feet 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 (check one): ☐ New ☐ Repaired ☐ Replacement 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.

07/08/2015

Date

Signature of Pump Installer Form: OLWR-SWR-1B (4/13)