

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 #: H110
Aquifer: _____
E-Log #: _____

County: Humphreys
Permit #: GW-47596 ✓
Driller: Tommy Peacok
Date drilling completed: 9/4/13

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 <small>(Landowner if borehole is not for a water well)</small>	Well or Borehole Location
Owner Name: <u>Domino Farms</u>	Latitude: <u>33°03'00"</u> Longitude: <u>90°39'13"</u>
Mailing Address: <u>P.O. Box 124</u>	Method of Lat/Long (check one): Conventional Survey _____
<u>Midnight</u> MS <u>39115</u>	USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
City State Zip Code	<u>NW 1/4 NW 1/4, Sec 19 T 14N R 04W</u>
Telephone No. <u>(662) 247-2288</u>	<u>7</u> Miles <u>west</u> of <u>Midnight</u>
	(Distance) (Direction) (Nearest Town)

Well / Borehole Data
Date drilling started: <u>9/4/13</u> Date drilling completed: <u>9/4/13</u> Hole depth: <u>112</u> Hole diameter: <u>26"</u>
Location of the source of any surface water used for drilling: _____ <u>Ditch 1 mile from well</u>
Method of dosing and volume of Chlorine used in drilling and development: <u>Chlorinated in tanker</u>
Logs run (circle all applicable): <input checked="" type="checkbox"/> No log run <input type="checkbox"/> Electric <input type="checkbox"/> Gamma Ray <input type="checkbox"/> Density <input type="checkbox"/> Sonic <input type="checkbox"/> Neutron <input type="checkbox"/> Other: _____
Name of organization running log(s): _____
Purpose of borehole (circle one): <input checked="" type="checkbox"/> Water Well <input type="checkbox"/> Geotechnical/Geological Investigation <input type="checkbox"/> Ground Source Heat Pump
<input type="checkbox"/> Seismic Survey <input type="checkbox"/> Other (describe) _____

If drilling is not related to water well construction, skip the remainder of this block

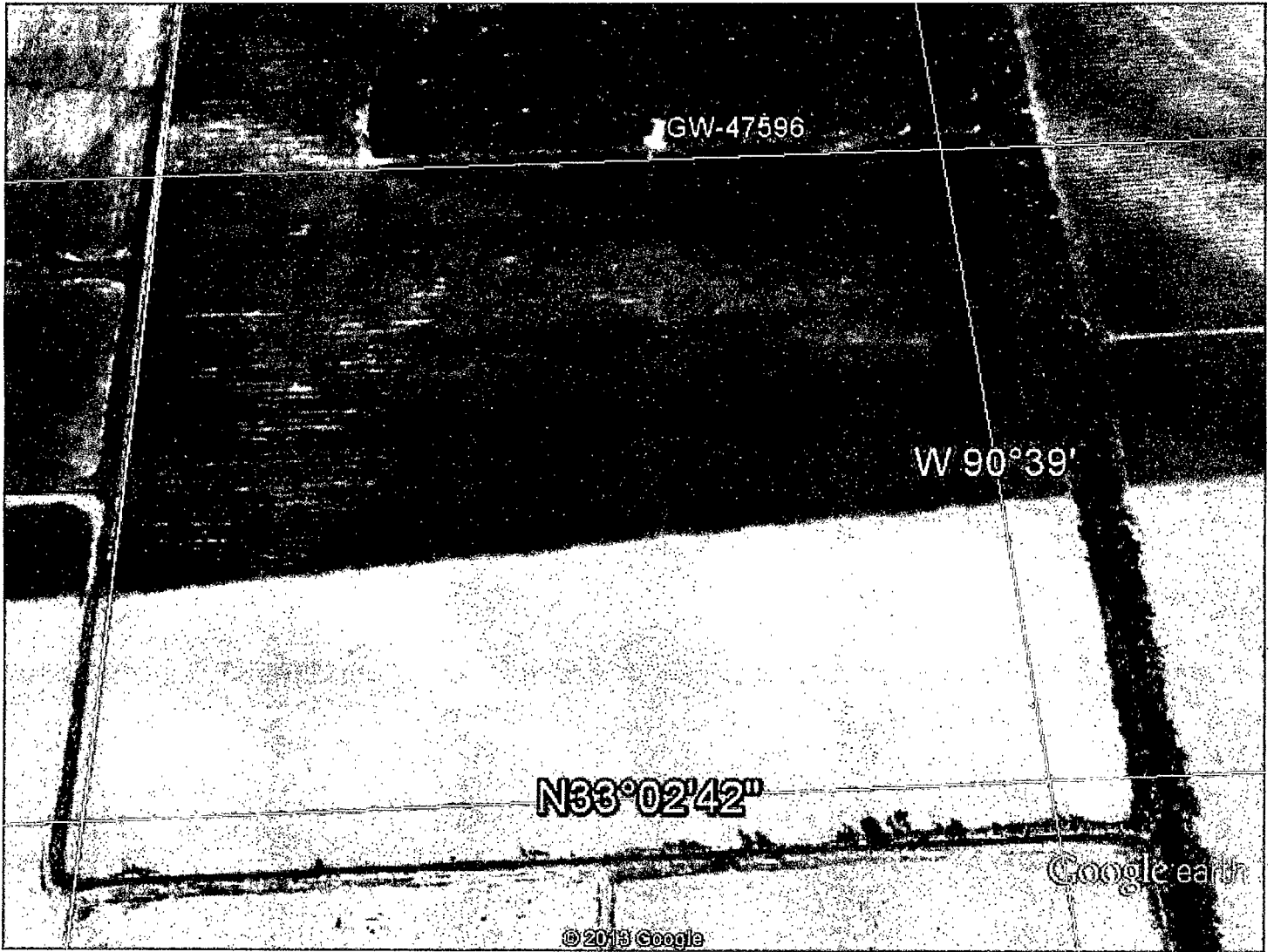
Purpose of Well (circle all applicable): Home Industrial Public Supply <input checked="" type="checkbox"/> Irrigation Fish Culture
Other (describe): _____
If a flowing well, method of flow regulation: Valve _____ Other (describe) _____
Static Water Level: _____ feet [above or below] land surface Date measured: _____ <small>(circle one)</small>
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe): _____
Well depth: <u>112</u> Well grouted to a depth of: <u>10</u> feet Type of grout (circle one): Neat Cement <input checked="" type="checkbox"/> Bentonite Mix
Casing length: <u>72</u> feet Casing diameter: <u>16</u> inches Type of casing: <u>PVC</u>
Screen length: <u>40</u> feet Screen diameter: <u>16</u> inches Type of screen: <u>PVC</u>
Screen slot size: <u>.050</u> inches Setting depth: From <u>72</u> feet to <u>112</u> feet
Type of completion (circle all applicable): <input checked="" type="checkbox"/> Gravel packed <input type="checkbox"/> Underreamed <input type="checkbox"/> Open hole <input type="checkbox"/> Natural Development
Other (describe): _____
Top of lap pipe or reduction in casing: _____ feet

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

RECEIVED
JUL 23 2013
BY: OLWR

[The page contains extremely faint, illegible text, likely bleed-through from the reverse side of the document. The text is too light to transcribe accurately.]

H110



Google earth



RECEIVED

SEP 23 2013

BY: OLWR

2 # well



Dean A. Pennington, PhD
Executive Director
P. O. Box 129
Stoneville, MS 38776
Tel.: (662) 686-7712
Fax: (662) 686-9078
www.ymd.org

Yazoo Mississippi Delta Joint Water Management District

H110

August 16, 2013

**DOMINO FARMS
P. O. BOX 124
MIDNIGHT, MS 39115**

RE: Well Construction/Authorization to drill

Permit No: GW-47596

DEAR DOMINO FARMS:

This authorization letter is for the construction of a new well that is to be drilled in the Mississippi River Valley Alluvial Aquifer. Your application has been received and is currently being processed.

**Location: NW1/4 of the NW1/4 Section 19 Township 14N Range 04W County HUMPHREYS
Latitude: 33 03 00 Longitude: 90 39 13**

A copy of this notice or a water use permit **must be** attached to the State Well Report submitted by your driller. This report is a requirement of the State Well Drillers Regulation. A copy of this report **must be** mail or faxed to YMD Joint Water Management District.

All applications must meet the **Mississippi Department of Environmental Quality** rules and regulations. If no adverse comments are received the application will be presented to the Mississippi Department of Environmental Quality State Permit Board for approval.

If you have any questions please call YMD at 662/686-7712.

Sincerely,

**Dillard Melton Jr.
Permitting Director**

RECEIVED

SEP 23 2013

BY: OLWR

1944

1945

1946

1947

1948

1949

1950

1951

1952

1953

1954

1955

1956

1957

1958

1959

1960

1961

1962

1963

1964

1965

1966

1947

1948

1949

1950

1951

1952

1953

1954

1955

1956

1957

1958

1959

1960

1961

1962

1963

1964

1965

1966

1967

1968

1969

1970