County:	Issaquena	
Permit #:	GW-46439)
Driller:	Irrigation Ed	uipment
Date drilli	ing completed:	05/09/2013

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

eckson, MS 39225-230 (601) 961-5210 (601) 360-0535 (fax)

For	Office	Use Only:
Well #:	<u></u>	82
Aquifer:		V
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** Well or Borehole Location (Landowner if borehole is not for a water well) Owner Name: Sharpe Farms Latitude: 32 48' 17.6 N Longitude: 91 03' 02.6 W Mailing Address: 485 Conner Road ☐ USGS quad, ☑ Hand-held GPS, ☐ Survey-grade GPS **Rolling Fork** 39159 Ms NE 1/4 NE 1/4, Sec 22 T 11 N R 8 W City State Zip code Telephone No. Miles South Mayersville (Distance) (Direction) (Nearest Town) Well / Borehole Data Date drilling started: 05/09/2013 Date drilling completed: 05/09/2013 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 development: 50 PPM Logs run (check all applicable): ☑ No log run ☐ Electric ☐ Gamma Ray ☐ Density ☐ Sonic ☐ Neutron ☐ Other: Name of organization running log(s): ___ Purpose of borehole (check 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: 9 feet [☐ above or ☒ below] land surface Date measured: 05/14/2013 (check one) Method of Measurement (check one) ☑ Steel tape ☐ Electric tape ☐ Air line ☐ Other: (describe) Well depth: 127 Well grouted to a depth of: 10 feet Type of grout (check one): ☐ Neat Cement ☐ Bentonite ☐ Mix Casing length: 87 feet Casing diameter: 16 inches Type of casing: PVC Screen length: 40 feel Screen diameter: 16 inches Type of screen: PVC Screen slot size: .050/.032 inches Setting depth: From 88 ____ feet to 127 Type of completion (check all applicable): 🛛 Gravel packed 🗋 Underreamed 🗖 Open hole 🗋 Natural Development RECEIVED Other (describe): Top of lap pipe or reduction in casing: JUN **io 3** 2013 If telescoped or more than one screen, describe on next page

Form: OLWR-SWR-1BY3) OLWF

The sketch below only required for water wells (I well telecopes, show deaths on sketch.) Description of formations encountered must be provided for all wells and borcholes, unless specifically exempted by regulations Description of formations Encountered From (depth) Clay Ground level Fine Sand 29 52 Fine Sand 8 Gravel 53 103 Medium Sand 8 Gravel 104 123 Clay 124 127 Screen: 88 - 107 20' .032 PVC 108 - 127 20' .050 PVC In order than one screen, show location of each on sketch Sketch the property layout and include the following:	County: Issaquena			j	or Office Use しゃみ	Offiy:
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	f more than one screen, show loc	cation of each on sketch				
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	the well location any permanent structur any roads, power lines	res on the property that r	nay aid in locating the well aid in locating the property and	the well		
andouner Name : Shame Farms	andowner Name: Share	me Farme				
	andowner Name: Shar	rpe Farms				
HEREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable equirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, f applicable, and state laws.	HEREBY CERTIFY that the wequirements of the Mississipp f applicable, and state laws.	well/borehole was drilled, bi Department of Environn	nental Quality and the Mississi	accordance wit	ii aii appacabie	ons,
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County:	issaquena
Permit #:	GW-46439
Driller:	Irrigation Equipment
Date drill	ing completed: 05/09/2013
	information from block on Part 1

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

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:
Veil#:	<u>C82</u>
quifer:	

Well Owner Information			artment at the above address within 30 days of well completion. Well Location				
Owner Name: Sharpe Fa	rms		Latitude:	32 48' 17	7.6 N	Longitude:	91 03' 02.6 W
Mailing Address: 485 Co	nner Road					_	ventional Survey,
			USGS	guad. 🔯 I	Hand-held (SPS. 🗀 Su	rvey-grade GPS
Rolling Fork							
City	State	Zip code		142 /	4 <u>1416</u> 74, 361	<u>. 22</u> · <u>111</u>	* K <u>O W</u>
Telephone No. (_		6	Miles	South	of _	Mayersville
			(Distanc	е)	(Direction)	(Nearest Town)
		Pump Ty	pe (check one)			
☐ Submersible ☑ Turbine	□ Air Lift □ Centr	ifugal 🖂 Flowing \	Nell □ let □	Pieton 🏻	Rotary □ C	ther <i>(desc</i>	rihe):
	14/2013		Rated Pump				
Is This Pump (check one):			-	оарасну.	2000-7-		_ Gallons Per Minute
(www. onloy.)			pe (check one)		· · · · · · · · · · · · · · · · · · ·	
☐ Electric ☑ Diesel ☐ Gas	oline 🗆 Natural G	ias [] Tractor PTC) ☐ Windmill [Other (d	describe):		
Horse Power Rating of Moto						ber of Stag	ies. 1
		Pump Test Data	for Non Flow	ing Well			
Date Well Tested:			Duration of	Pump Te	st <i>(minimur</i>	n 4 hours):	Hours
Static Water Level (A):							
							Gallons Per Minute
Method of measurement (cl							
		Pump Test Da					
Measured shut in head:	Fe	et					
Well yielded	GPM with a dra	wdown of		feet after		ho	ours of pumping
		Meter	installation				
Meter Manufacturer: No	ne Installed		Meter S	erial Num	iber:		
Meter Model Number/Name	:		Туре	of Meter:			
Totalizer Register Unit and	Multiplier Factor (A	NF x .001, gal x 10	00, etc):				
Installation Date:	Met	er installed by:	Michael Company				
ls This Meter (check one): [☐ New ☐ Repaire	ed 🗌 Replacemen	t				
Important: By submitt		rmation you are ce l wells, a list of app				-	cturer standards.
LUEBERVAFATIFY	a abaya atatar	45 and 4m; - 4 - 4b - 1			+		
I HEREBY CERTIFY that the	ie above statemer	its are true to the t	oest of my kno	wiedge.	7		RE(
Patrick Chism	0695			24/2013	TE	\supset . \sim	

Date

Signature of Pump Installer Form: OLWR-SWR-1B (4) (3) 0 3 2013