

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 #: F57
Aquifer:
E-Log #:

County: Quitman
Permit #: MS-GW-497931
Driller: Tommy Peacock Sr
Date drilling completed: 5-19-17

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: Mascof Planting Co.
Mailing Address: 7045 New Africa Rd
City: Clarksdale MS 38614
Well or Borehole Location 14-22
Latitude: N34° 18' 21" Longitude: W90° 21' 74"
Method of Lat/Long (check one): Conventional Survey
USGS quad, Hand-held GPS, Survey-grade GPS
NE 1/4 NW 1/4, Sec 18 T. 28N R. 07E
2 Miles SE of Marks (Distance) (Direction) (Nearest Town)

Well / Borehole Data
Date drilling started: 5-19-17 Date drilling completed: 5-19-17 Hole depth: 115' Hole diameter: 24"
Location of the source of any surface water used for drilling: nearby well
Method of dosing and volume of Chlorine used in drilling and development: when filling pit
Logs run (circle 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 (circle 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: 24' feet [above or below] land surface Date measured: 5-19-17
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe)
Well depth: 115' Well grouted to a depth of: 10 feet Type of grout (circle one): Neat Cement Bentonite Mix
Casing length: 75 feet Casing diameter: 16 inches Type of casing: PVC
Screen length: 40 feet Screen diameter: 16 inches Type of screen: PVC
Screen slot size: 1-.050 1-.032 inches Setting depth: From 75 feet to 115 feet
Type of completion (circle 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

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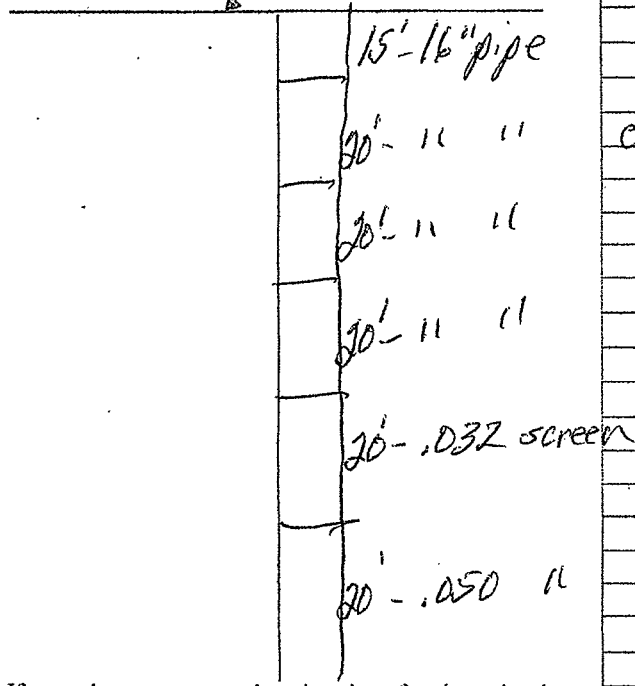
County: Duittman  
 Permit #: MS-GW-49793

For Office Use Only:  
 Well #: FS7

The sketch below only required for water wells

If well telescopes, show depths on sketch.

Ground Level         



If more than one screen, show location of each on sketch

Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

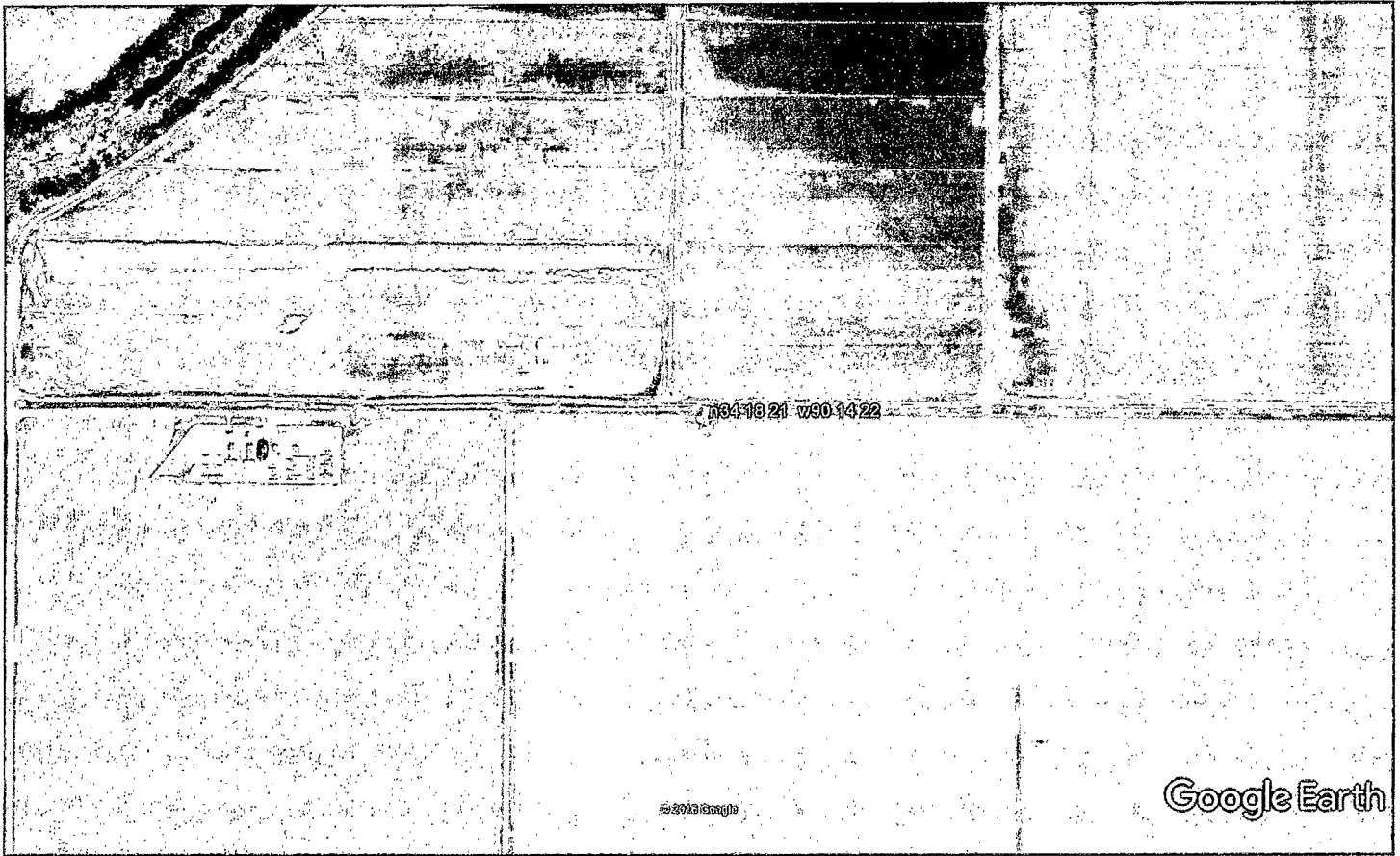
Description of Formations Encountered	From (depth) Ground level	To (depth)
top soil	0	12
fine sand	12	65
medium sand	65	75
coarse sand & gravel	75	115

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

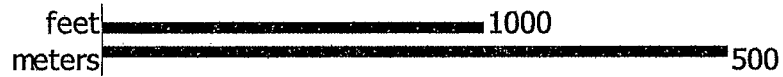
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Landowner Name: Mascat Planting Co.

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.



Google Earth



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# 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)

<b>For Office Use Only:</b>
Well #: <u>F57</u>
Aquifer: _____

County: <u>Quitman</u>
Permit #: <u>CW-49793</u>
Driller: <u>Tommy Peacock Sr</u>
Date completed: <u>5-19-17</u>
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	Well Location
Owner Name: <u>MASCOT PLTG CO</u>	Latitude: <u>34° 18.20"</u> Longitude: <u>90° 14.21.6"</u>
Mailing Address: <u>7045 New Africa Rd</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
<u>CLARKSDALE</u> City <u>MS</u> State <u>38614</u> Zip Code	USGS quad <u>NENW</u> 1/4, <u>NE NW</u> 1/4, Sec <u>16</u> T <u>28N</u> R <u>01E</u>
Telephone No. <u>(662) 624-5943</u>	<u>3.5</u> Miles <u>NNE</u> of <u>MARKS</u> (Distance) (Direction) (Nearest Town)

**Pump Type (circle one)**

Submersible  Turbine    Air Lift \_\_\_\_\_    Centrifugal \_\_\_\_\_    Flowing Well \_\_\_\_\_    Jet \_\_\_\_\_    Piston \_\_\_\_\_    Rotary \_\_\_\_\_    Other (describe): \_\_\_\_\_

Date Pump Installed: 5-22-17      Rated Pump Capacity: 3000 Gallons Per Minute

Is This Pump (circle one):  New    Repaired \_\_\_\_\_    Replacement \_\_\_\_\_

**Power Type (circle one)**

Electric  Diesel    Gasoline \_\_\_\_\_    Natural Gas \_\_\_\_\_    Tractor PTO \_\_\_\_\_    Windmill \_\_\_\_\_    Other (describe): \_\_\_\_\_

Horse Power Rating of Motor: 80      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

Static Water Level (A): 24 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 (circle one): Steel tape \_\_\_\_\_    Electric tape \_\_\_\_\_    Air line \_\_\_\_\_    Other (describe): \_\_\_\_\_

**Pump Test Data for Flowing Well**

Measured shut in head: \_\_\_\_\_ feet.

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    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.*

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**JUN 08 2017**  
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I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

DAVID P. HOLT 0-752P      6-5-17      [Signature]  
 Print Name of Pump Installer and License No. (if applicable)      Date      Signature of Pump Installer

16-1172