

State Well Report

Part I - Driller's Log

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225
(601)961-5210
(601)961-5228 (fax)

For Office Use Only:

Aquifer: _____
Well #: 598
L. S. Elevation: _____
E-log #: _____

County: Quitman
Permit #: 493671
Driller: TEODY COATS
Date drilling completed: 6-16-16

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.

Information on Well Owner (Landowner if borehole is not for a water well)	Well or Borehole Location
Owner Name: <u>Newton Beverly</u>	Latitude: <u>34° 13.20'</u> Longitude: <u>90° 9.57'</u>
Mailing Address: <u>3437 Village Glen Court</u> <u>Smellville GA 30039</u> City State Zip Code	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS <u>NW 1/4 SW 1/4 Sec 11 Twn 27N Rng 01E</u>
Telephone No. () _____	Distance <u>7</u> Miles <u>SE</u> of <u>Marks</u> Nearest Town

Well / Borehole Data

Date drilling started: 6/16/16 Date drilling completed: 6/16/16 Hole depth: 110 Hole diameter: 2 1/2

Location of the source of any surface water used for drilling: Nearest Well

Method of dosing and volume of Chlorine used in drilling and development: _____

Logs run (circle 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 one): Home _____ Industrial _____ Public Supply _____ Irrigation Fish Culture _____ Other: _____

If a flowing well, method of flow regulation: Valve _____ Other (describe) _____

Static Water Level: 20 feet above of below (circle one) land surface Date measured: 6-16-16

Method of Measurement (circle one) steel tape electric tape air line other: _____

Well depth: 110 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 70 feet Casing diameter: 16 inches Type of casing: P.V.C

Screen length: 40 feet Screen diameter: 16 inches Type of screen: P.V.C

Screen slot size: 050 inches Setting depth: From 0⁷⁰ feet to 70¹¹⁰ feet

Type of completion (circle all applicable): Gravel packed Underreamed Telescoped 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*

Form: OLWR-SWR-1A (04/08)
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JUL 07 2016
By OLWR

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:

Well #: J 98
 Aquifer: _____

County: QUITMAN
 Permit #: GW. 49363 49367
 Driller: JOLTED WELL SERVICE
 Date completed: 6-16-16
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>BUTCH Scipper</u>	Latitude: <u>34° 13.20'</u> Longitude: <u>90° 09.57"</u>
Mailing Address: <u>220 Chestnut St Ste 2</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
City: <u>MARKS</u> State: <u>MS</u> Zip Code: <u>38646</u>	NW <input checked="" type="checkbox"/> SW <input checked="" type="checkbox"/> Sec. <u>11</u> T <u>27N</u> R <u>01E</u>
Telephone No. <u>(601) 444-2661</u>	<u>3.5</u> Miles <u>NNW</u> of <u>CROWDER</u> (Distance) (Direction) (Nearest Town)

Pump Type (circle one)

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

Date Pump Installed: 6-23-16 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): _____ 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): _____

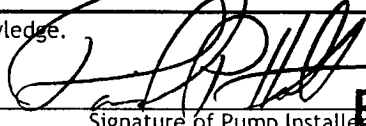
Installation Date: _____ Meter installed by: _____

Is This Meter (circle one): New Repaired Replacement

Important: By submitting the above information you are certifying that this meter was installed to manufacturer's standards. For agricultural wells, a list of approved meters is on the MDEQ website.

Received

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

DAVID P. HOLT 0-752 P 7-5-16  JUL 08 2016
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer

By OLWR

16-011-1

3918



Marks
Mississippi

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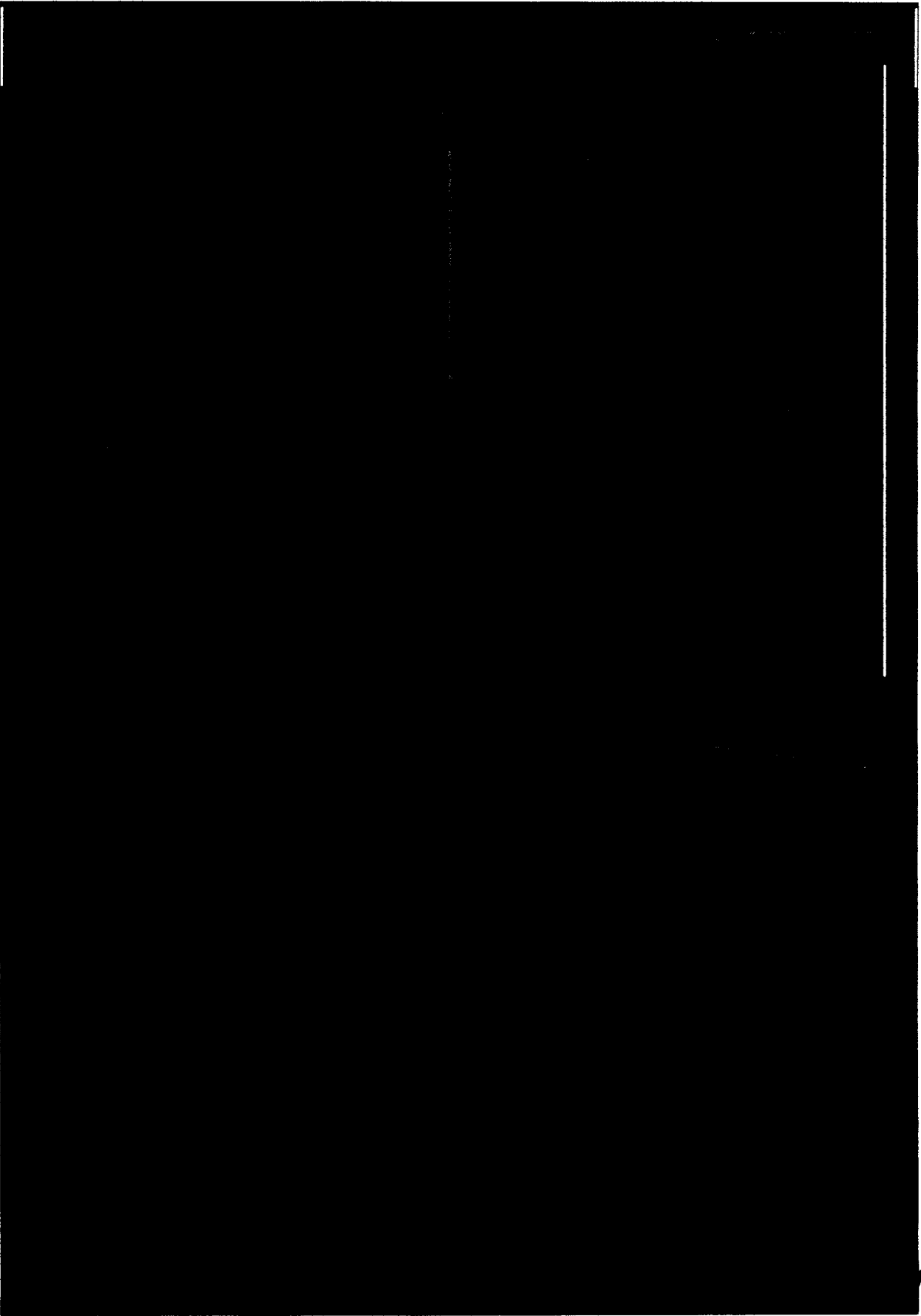
Hedd Rd

34, 13, 21

90

56

Page 1 of 1
Printed from my iPhone



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JUL 07 2016

By OLWR

STATE OF MISSISSIPPI
Department of Environmental Quality
Office of Land and Water Resources
P. O. Box 2309
Jackson, Mississippi 39225

598

PERMIT
TO DIVERT OR WITHDRAW FOR BENEFICIAL USE THE PUBLIC WATERS

This permit is issued to the landowner named below in accordance with the provisions of the Mississippi Water Laws, Mississippi Code Sections 51-3-1, et seq. (1972, as amended), and the regulations and standards as promulgated thereunder. Whether or not specifically named in this permit or in the applications for this permit, anyone using water from the diversion/withdrawal point described below shall do so in compliance with the provisions of this permit. Neither this permit, nor any authority conferred hereby, may be sold, conveyed, encumbered, assigned, or otherwise aliened, for any period of time or under any conditions whatsoever. This permit may not be modified, transferred or revoked without prior action by the Permit Board. Any attempts to modify, transfer or revoke this permit, or to take any other action on this permit, shall be invalid and unenforceable and may result in immediate revocation or suspension of this permit. The holder of this permit shall at all times be responsible for adherence to the terms and conditions of this permit. No agreement between the permit holder and any other party shall affect the obligations and liabilities of the permit holder. Water use under this permit is allowed only when the streamflow, lake level elevation, or static groundwater level (whichever, if any, is applicable) is above the established minimum, pursuant to Mississippi Code Section 51-3-7. Authorization is hereby granted to divert/withdraw water for the beneficial use designated herein, and for no other purpose, subject to the following terms, conditions, and limitations:

Permit Number: MS-GW-49367

Landowner Name: NEWTON, BEVERLY

Landowner Address: 3437 VILLAGE GLENN COURT
SNELLVILLE GA 30039

Source Of Water: MISSISSIPPI RIVER VALLEY ALLUVIAL AQUIFER

Beneficial Use: IRRIGATION

Diversion/Withdrawal Location: NW 1/4 of the SW 1/4 **Section:** 11 **Township:** 27N **Range:** 01E

County: QUITMAN

Quad: CROWDER

Maximum Volume: 210 Acre-Feet/Year *equivalent to* .1874 Million Gallons/Day

Maximum Rate: 3000 Gallons/Minute

Applicant Name: SCIPPER, BUTCH

Applicant Address: 220 CHESTNUT STREET STE 2
MARKS MS 38646

Date Permit Issued: 04/22/2016

Date Permit Expires: 04/22/2021

Date Permit Modified:

Date Permit Re-issued:

This permit shall be deemed null and void if construction has not begun within one (1) year of permit issue date

SPECIAL TERMS AND CONDITIONS: SEE ATTACHMENT 1, WHICH IS HEREBY DECLARED TO BE PART OF THIS PERMIT.

SPECIAL TERMS AND CONDITIONS 2:

Received

Gary C. Rikard JUL 07 2016
By OLWR

Gary C. Rikard, Executive Director
Mississippi Department of Environmental Quality