County:	Sunflower	
Permit #:	GW-50450	1.
Driller:	Irrigation Ec	uipment, Inc.
Date drilli	ng completed:	5-18-18

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 #:	<u> A95</u>
Aquifer:	
E-Log #:	

Department at the above address within 30 days of compl	- · · · · · · · · · · · · · · · · · · ·
Well Owner Information (Landowner if borehole is not for a water well)	Well or Borehole Location
· · · · · · · · · · · · · · · · · · ·	Latitude: 33° 58' 52.7"N Longitude: 90° 33' 54.0"W
	Method of Lat/Long (check one): ☐ Conventional Survey,
	☐ USGS quad, ☑ Hand-held GPS, ☐ Survey-grade GPS
Aberdeen MS 39370 City State Zip code	<u>SE</u> ¼ <u>NW</u> ¼, Sec <u>1</u> T <u>24N</u> R <u>4W</u>
Telephone No(Miles West of Rome (Distance) (Direction) (Nearest Town)
Well / Bore	
Date drilling started: 5-18-18 Date drilling completed: 5-	-18-18 Hole depth: 127' Hole diameter: 24"
Location of the source of any surface water used for drilling: Su	rface Water
Method of dosing and volume of Chlorine used in drilling and devel	opment: 50 PPM
Logs run (check all applicable): ⊠ No log run ☐ Electric ☐ Gamm	na Ray 🗌 Density 🔲 Sonic 🗌 Neutron 🔲 Other:
Name of organization running log(s):	
Purpose of borehole (check one): Water Well Geotechn	ical/Geological Investigation
☐ Seismic Survey ☐ O	ther (describe)
If drilling is not related to water well cons	truction, skip the remainder of this block
Purpose of Well <i>(check all applicable)</i> : ☐ Home ☐ Industrial ☐ Pu	blic Supply ⊠ Irrigation □ Fish Culture
☐ Other (describe):	RECEIVE
If a flowing well, method of flow regulation: Valve	
Static Water Level: 49 feet [☐ above or ☒ below (check one)	I land surface Date measured: 5-23-18
Method of Measurement (check one) ☑ Steel tape ☐ Electric tape	e 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 feet Screen diameter: 16	inches Type of screen: PVC
Screen slot size:050 inches Setting depth:	From <u>88</u> feet to <u>127</u> feet
Type of completion (check all applicable): ☑ Gravel packed ☐ Un	derreamed
Other (describe):	
Top of lap pipe or reduction in casing: Feet	
If telescoped or more than one	screen, describe on next page

	1	For Office Use Only:			
county: Sunflower	Well #:	A95			
Permit #: GW-50450					
he sketch below only required for water wells	Description of formations encountered n	ust be provided for a	ll wells		
well telescopes, show depths on sketch.	and boreholes, unless specifically exemp	ted by regulations			
Ground level	Description of Formations Encountered	d From (depth) Ground level	To (depth)		
<u> </u>	Clay Fine Sand	80	82		
	Med. Sand & Gravel	83	127		
1					
, 4					
			ļ		
			ļ		
			-		
more than one screen, show location of each on sketch			l		
ketch the property layout and include the following: 1) the well location 2) any permanent structures on the property that 3) any roads, power lines, or other items that ma 4) a north arrow	t may aid in locating the well ay aid in locating the property and the well	RECEIVE	ED.		
4) a notification	Г				
		AUG 27 20	18		
		- I 1A	10		
		BY OLV	VIC		
andowner Name:					

8-14-18

Date

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

Print Name of Responsible Licensee and License No.

0695

County: Sunflower Permit #: GW-50450 Driller: Irrigation Equipment, Inc. Date drilling completed: 5-18-18 Copy information from block on Part 1

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 #:	<u>A95</u>		
Aquifer:			

This part of the report must be of the report must be attached				address with		
Owner Name: Indian Mound	l Parris		Latitude: 33° 5			90° 33' 54.0"W
Mailing Address: P.O. Box 9		-84 - 22				ventional Survey,
		·····		- '	-	-
			USGS quad,			
Aberdeen City	MS State	39370 Zip code	<u> </u>	E ¼ <u>NW</u> ¼	, Sec <u>1</u> T <u>24N</u>	R <u>4W</u>
Telephone No. (Mile			
	··· · ··· ··· ··· ··· ··· ··· ··· ·		(Distance)	(Direc	tion)	(Nearest Town)
	, ., .	Pump Typ	e (check one)			
☐ Submersible ☑ Turbine ☐ A		fugal ☐ Flowing V	Vell ☐ Jet ☐ Piston	☐ Rotary ☐	Other (descr	ibe):
Date Pump Installed 5-23-1			Rated Pump Capac	ty: <u>2000+/</u>	•	_ Gallons Per Minute
Is This Pump (check one): X	New ∐ Repaire		t pe (check one)			
☑ Electric ☐ Diesel ☐ Gasolir	ne ⊟ Natural Ga			er (describe)		l
Horse Power Rating of Motor:			80			
					unibor or orag	
**************************************		Pump Test Data	for Non Flowing W	ell		
Date Well Tested:			Duration of Pump	Test (minin	num 4 hours):	Hours
Static Water Level (A):	Feet Be	low Land Surface	Pumping Water t	.evel (B):	Fe	et Below Land Surface
Drawdown [(B) - (A)]:	Feet	Below Land Surf	ace Test Pumping	Rate:		Gallons Per Minute
Method of measurement (chec	k one): 🗌 Steel	tape 🗆 Electric ta	ape 🗌 Air line 🔲 Otl	ner (describe	e):	
		Pump Test Dat	ta for Flowing Well			
Measured shut in head:	Fee	et				
Well yielded	GPM with a draw	wdown of	feet a	fter	hc	ours of pumping
		Meter I	nstallation			DECENT
Meter Manufacturer:			Meter Serial N	lumber:		KECEIV 4
Meter Model Number/Name:			Type of Met	er:		AUG 27 201
- Totalizer Register Unit and M ul	ltiplier Factor (A	F x .001, gal x 100	00, etc):			100
Installation Date:	Mete	r installed by:				RECEIVE AUG 27 201 BY OLW
						Tan and
Is This Meter (check one):	New ☐ Repaire		t			
Is This Meter (check one): Important: By submitting	the above infor	d Replacemen				acturer standards.
Is This Meter (check one): Important: By submitting	the above infori For agricultural	d Replacemen mation you are cen wells, a list of app	rtifying that this met proved meters is on t	he MDEQ w		acturer standards.
Is This Meter (check one):	the above infori For agricultural above statement	d ☐ Replacemen mation you are ce wells, a list of app ts are true to the b	rtifying that this met proved meters is on t	e. C	ebsite.	of Pump Installer

STATE OF MISSISSIPPI

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

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-50450

Landowner Name: INDIAN MOUND FARMS

Landowner Address: PO BOX 926

ABERDEEN

MS 39370

Source Of Water: MISSISSIPPI RIVER VALLEY ALLUVIAL AQUIFER

Beneficial Use: IRRIGATION

Diversion/Withdrawal Location: SE 1/4 of the NW 1/4 Section: 01 Township:24N Range: 04W

County: SUNFLOWER Quad: BALTZER

Maximum Volume: 360 Acre-Feet/Year equivalent to .3213 Million Gallons/Day

Maximum Rate: 2500 Gallons/Minute

Applicant Name: SCALLION, J R

Applicant Address: PO BOX 926

ABERDEEN MS 39370

AUG 27 2018

RECEIVED

Date Permit Issued: 07/11/2018

Date Permit Expires: 07/11/2023

BY OLWR

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.

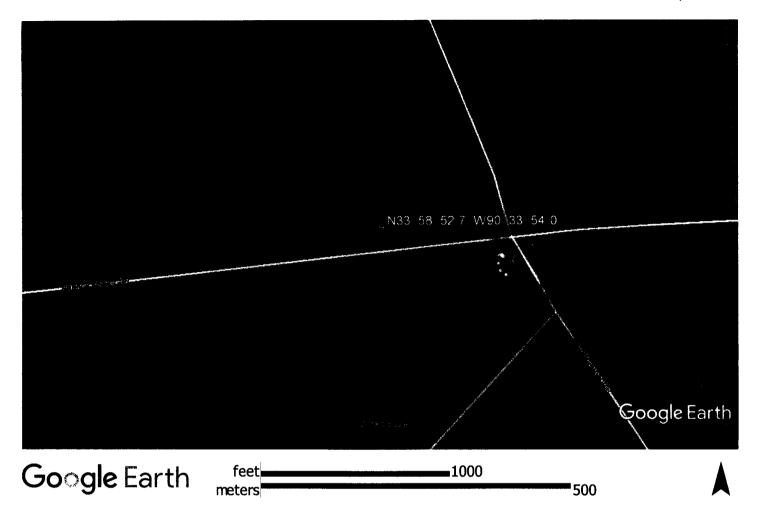
SPECIAL TERMS AND CONDITIONS 2: WATER VOLUME MUST BE REDUCED BY AMOUNT OF WATER APPLIED TO THE SAME

ACREAGE FROM OTHER PERMITTED POINTS.

Gary C. Rikard, Executive Director

Mississippi Department of Environmental Quality

Day Chilen



RECEIVED AUG 27 2018 BY OLWR