

STATE OF MISSISSIPPI



Department of Environmental Quality
Office of Land and Water Resources

CERTIFICATE OF PERMIT COVERAGE

*Under Mississippi's GROUNDWATER WITHDRAWAL GENERAL PERMIT
TO WITHDRAW groundwater from the Mississippi River Valley Alluvial Aquifer
FOR the beneficial use of Irrigation, Aquaculture, or Enhancement of Wildlife Habitat*

General Permit: MRVA-002
Certificate Number: MS-GW-50816

Total Permitted Acreage: 37

Landowner Name: FINN, GERALD
Landowner Address: PO BOX 5276
GRANBURY, TX 76049

Source of Water: MISSISSIPPI RIVER VALLEY ALLUVIAL AQUIFER
Beneficial Use(s): IRRIGATION

Diversion/Withdrawal Location: NW 1/4 of the NW 1/4 Section: 03 Township: 23N Range: 03W

County: SUNFLOWER Quadrangle: BALTZER

Permitted Acreage: Irrigation: 37 Fish Culture: 0 Wildlife Management: 0

Maximum Volume: See Special Terms And Conditions (attachment I)

Applicant Name: DOTY, HUNTER
Applicant Address: 360 NORTH BAYOU ROAD
BOYLE, MS 38730

Date Original Permit Issued: 07/30/2019

Date Coverage Expires: 07/30/2024

Date Coverage Modified:

Date Coverage Granted:

SPECIAL TERMS AND CONDITIONS 1:
See Attachment I which is hereby declared part of this permit.

SPECIAL TERMS AND CONDITIONS 2:
REPLACEMENT WELL FOR MS-GW-43034.

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County: Sunflower
 Permit #: GU-50816
 Driller: Joel Jumper
 Date drilling completed: 10-24-19

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 #: D 155
 L. S. Elevation: _____
 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.

Information on Well Owner (Landowner if borehole is not for a water well)	Well or Borehole Location
Owner Name: <u>Gerald Finn</u>	Latitude: <u>33° 53' 55"</u> Longitude: <u>90° 30' 08"</u>
Mailing Address: <u>Po Box 5276</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
<u>Granbury Tx 76049</u> City State Zip Code	<u>NW 1/4 NW 1/4 Sec 03 Twn 23N Rng 03W</u>
Telephone No. () _____	Distance <u>1/2</u> Miles Direction <u>South</u> of Nearest Town <u>Parchman</u>

Well / Borehole Data

Date drilling started: 10-24-19 Date drilling completed: 10-24-19 Hole depth: 117 Hole diameter: 26in

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: 41 feet above or below (circle one) land surface Date measured: 10-24-19

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

Well depth: 117 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 77 feet Casing diameter: 16 inches Type of casing: PVC

Screen length: 40 feet Screen diameter: 16 inches Type of screen: PVC

Screen slot size: 0.50 inches Setting depth: From 0 feet to 70 feet

Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development

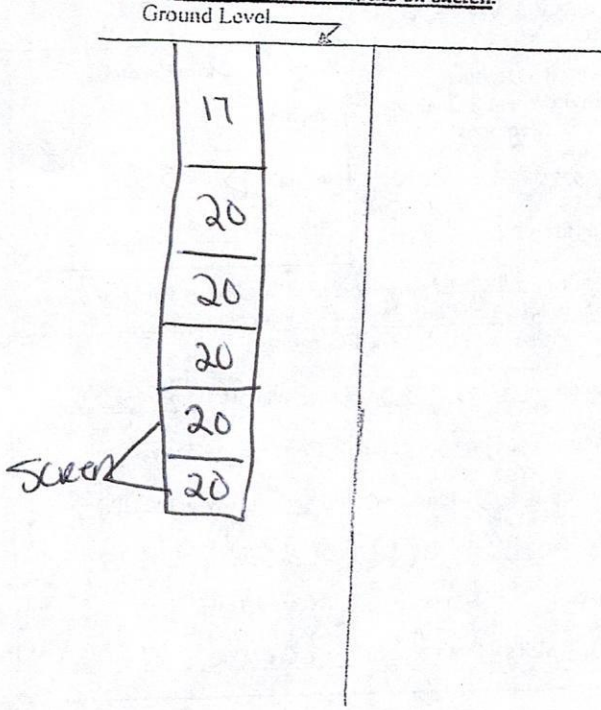
Other (describe): _____

Top of lap pipe or reduction in casing: _____ feet. *If telescoped or more than one screen, describe on next page*

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The sketch below only required for water wells

If well telescopes, show depths on sketch.

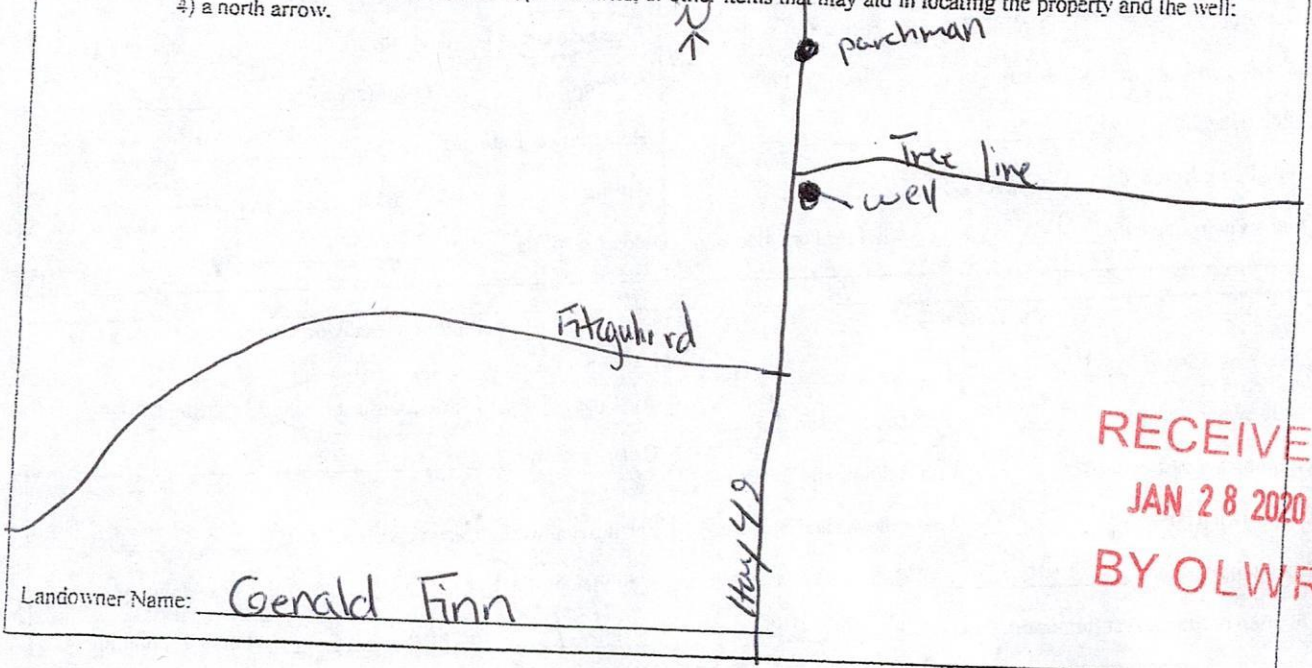


Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth)	To (depth)
TOP Soil	Ground Level	20
Clumba	20	40
Fine sand	40	60
Course sand	60	80
Course sand	80	100
Gravel	100	117

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

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) a north arrow.



Form: OI.WR-SWR-1A (04/08)

I 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.

Joel Jumper 5317 10-24-19
 Print Name of Responsible Licensee and License No. Date

[Handwritten Signature]
 Signature of Licensee

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
 (601)961-5210
 (601)961-5228 (fax)

County: Sunflower
 Permit #: GW-50816
 Driller: Joel Jumper
 Date completed: 10-24-19
Copy information from block on Part 1

For Office Use Only:

Aquifer: _____
 Well #: D 155
 Elevation: _____

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>Gerald Finn</u>	Latitude: <u>33-53-55</u> Longitude: <u>90-30-08</u>
Mailing Address: <u>Po Box 5276</u>	Method of Lat/Long (check one): Conventional Survey _____
<u>Granbury Tx 76049</u> City State Zip Code	USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
Telephone No. () _____	<u>NW 1/4 NW 1/4 Sec 03 T 23N R 03W</u>
	Distance Direction Nearest Town <u>1/2 Miles South of Parchman</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet <input type="radio"/> Submersible <input checked="" type="radio"/>	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston <input type="radio"/> Turbine <input type="radio"/>	Electric Motor <input checked="" type="radio"/> Hand <input type="radio"/> Tractor PTO <input type="radio"/>
Centrifugal Rotary <input type="radio"/> Flowing Well <input type="radio"/>	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>30</u>
Date Pump Installed: <u>10-24-19</u>	Setting Depth: <u>0 to 70</u> feet
Rated Pump Capacity: <u>1,100</u> Gallons Per Minute	Number of Stages: <u>1</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>10-25-19</u>	Air Line <input type="radio"/> Electric Measuring Line <input checked="" type="radio"/> Steel Tape <input type="radio"/>
Static Water Level (A): <u>41</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>54</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>54</u> Feet Below Land Surface	Well yielded <u>1,100</u> GPM with a drawdown of
Test Pumping Rate: <u>1,100</u> Gallons Per Minute	<u>54</u> feet after <u>8</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>8</u> hours	

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

Joel Jumper 5317 [Signature]
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

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