County:	Sunflower	
Permit #:	GW-4579	1 /
Driller:	Irrigation Equipment	
	ng completed:	03/07/2012

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

	For Office Use Only:
Aquifer:	M /5/
Well #:	
L.S. Eleva	ion:
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.

Depart	ment at the above address within 30 days	s of completion of drilling of the well or borehole.
	rmation on Well Owner if borehole is not for a water well)	Well or Borehole Location
Owner Name Billu	ips Plantation Inc	Latitude: 33 ° 27 ' 10 " Longitude: 90 ° 41 ' 02 "
Mailing Address: 65 H	Iolly Ridge Road	Method of Lat/Long (check one): Conventional Survey,
		☐ USGS quad, ☐ Hand-held GPS, ☐ Survey-grade GPS
Indi	anola Ms 38751	SW 4 NE 4 Sec 35 V Twn 19 N Rng 5 W
City	State Zip code	Distance Direction Nearest Town
Telephone No. (662	9) 887-3821	Miles West of Indianola
	Well / F	Borehole Data
Date drilling started: _0	Date drilling completed: 03	/07/2012 Hole depth: 125 Hole diameter: 24"
	f any surface water used for drilling: Surface olume of Chlorine used in drilling and developed developed to the control of th	
Logs run (check all appl Name of organization ru		na Ray
Purpose of borehole (che	eck one): Water Well Geotechnic	al/Geological Investigation Ground Source Heat Pump
	Seismic Survey Other	(describe)
		onstruction, skip the remainder of this block
Purpose of Well (check	one)	upply Irrigation Fish Culture Other:
If flowing, method of flo	ow regulation: Valve Other (d	escribe)
Static Water Level: 3	feet above or below (check one)	and 🛮 surface Date measured: 03/08/2012
Method of Measurement	t (check one) 🖾 steel tape 🔲 electric tape	☐ air line ☐ other:
Well depth: 125	Well grouted to a depth of feet	Type of grout (check one): ☐ Neat Cement ☒ Bentonite ☐ Mix
Casing length: 85	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	86 feet to 125 feet
Type of completion (che	eck all applicable): A Gravel packed	Underreamed
	Other (describe):	
Top of lap pipe or reduc	tion in casing: feet.	If telescoped or more than one screen, describe on next page

Form: OLWR-SWR-1A (04/08)

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T	 below only	 £	

If well telescopes, show depths on sketch.

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

m	15	1
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ound level	Description of Formations Encountered Fro	m (depth) To (d
	Clay	ound level 28
	Fine Sand 29	49
	Fine Sand & Gravel 50	58
	Medium Sand & Gravel 59	125
ŀ		
l		1
more than one screen, show location of each	on sketch	
the property layout and include the	e following: 1) the well location; 2) any permanent structures on the pro-	nerty that may
aid in locating the well.	any roads, power lines, or other items that may aid in locating the prope	erty and the we
1) a north arrow	many rounds, possess mines, or ounce member man may and in nocating the prope	ity and the We

aid in	syout and include the following: 1) the well location; 2) any permanent locating the well; 3) any roads, power lines, or other items that may aid orth arrow.	
Landowner Name:	Billups Plantation Inc.	
	makala miaa distiladi aasistamaatad and aasis latad ta'u aasis latad ta'u aasis latad ta'u aasis latad ta'u aa	Form: OLWR-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

Patrick Chism/Irrigation Equipment 0695

Print Name of Responsible Licensee and License No.

03/13/2012

Date

Signature of Licensee

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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 (601) 961-5210

For Office Use Only:		
Aquifer:		
Well #:	MISI	
Elevation:		

Driller: Irrigation Equipment Date drilling completed: 03/07/2012Copy information from block on Part 1 (601) 961-5228 (fax)

County: Sunflower Permit #: GW-45791

			ll contractor or a licensed pump installer. A copy of Part 1 of the t at the above address within 30 days of well completion.		
Well Owner Information		rmation	Well Location		
Owner Name:	Billups Plantation In	с.	Latitude: 33 27' 10 N Longitude: 90 41' 02 W		
Mailing Address: 65 Holly Ridge Road		ad	Method of Lat/Long (check one): ☐ Conventional Survey, ☐ USGS quad, ☐ Hand-held GPS, ☐ Survey-grade GPS		
Telephone No.	Indianola City (662) 887-3821	Ms 38751 State Zip code	SW 1/4 NE 1/4 Sec 35 T 19 N R 5 W Distance Direction Nearest Town Miles West of Indianola		
	Pump Typ Check one		Power Type Check one		
Air Lift	☐ Jet	Submersible	☐ Diesel Engine ☐ Gasoline Engine ☐ Natural Gas		
Bucket	☐ Piston	Turbine	☑ Electric Motor ☐ Hand ☐ Tractor PTO		
☐ Centrifugal	☐ Rotary	Flowing Well	☐ Windmill ☐ Other (specify):		
Other (specify): _			Horse Power Rating of Motor: 60		
	ed: 03/08/2012		Setting Depth: 70 feet		
Rated Pump Capa	city 2500 +/-	Gallons Per Minute	Number of Stages: 1		
***************************************	Pump Test D	ata	Method of Measuring Water Level Check one		
Date Well Tested:			Air Line Electric Measuring Line Steel Tape		
Static Water Level	l (A):	Feet Below Land Surface	Other (specify):		
Pumping Water Le	evel (B):	Feet Below Land Surface			
Drawdown [(B) -	(A)]:	Feet Below Land Surface	For flowing well, measured shut in head: feet		
Test Pumping Rate: Gallons Per Minute		Gallons Per Minute	Well yielded GPM with a drawdown of		
Duration of Pump	Test (minimum 4 hours): hours	feet after hours of pumping		
This is for (c	check one):	lew Well Replacen	ment of Existing Pump Repair of Existing Pump		
Patrick Chisn	n/Irrigation Equipm	ements are true to the best of m	ny knowledge.		
Print Name of Pump Installer and License No. (if applicable)			Signature of Pump Installer		

Form: OLWR-SWR-1C (07-09)