	STATE W	ELL REPORT	For Office Use Only:
County: Sunflower		Part 1	Well #: T1810
Permit #: GW-49652	Dri	iller's Log	Aquifer:
Driller: Irrigation Equipment, Inc.		ent of Environmental Quality and Water Resources	E-Log #:
Date drilling completed: 7-29-16	P.C Jackson,). Box 2309 , MS 39225-2309 1) 961-5210	
	. ,	360-0535 (fax)	
State Law requires that this report Department at the above address v	be prepared by the lic	cense holder responsible for	r the work and filed with the
Well Owner Inform	ation		prehole Location
(Landowner if borehole is not f	-	22 201 44 28	· · · · · · · · · · · · · · · · · · ·
Owner Name: Westchester Group -	Scott Mitchell	Latitude: <u>33 20' 11.2"</u>	Longitude: 90 33' 36.3"
Mailing Address: 1207 Cardinal Circ	le	Method of Lat/Long (check of	ne): 🔲 Conventional Survey,
		🔲 USGS quad, 🖾 Hand-hel	d GPS, 🔲 Survey-grade GPS
Indianola MS City Sta	38751 ate Zip code	<u>SW</u> ¼ <u>NE</u> ¼,	Sec <u>12</u> T <u>17N</u> R <u>4W</u>
Telephone No. () -		Miles Si (Distance)	
	····	(Distance) (Direc	tion) (Nearest Town)
Date drilling started: 7-29-16	Date drilling completed:	7-29-16 Hole depth: 12	7' Hole diameter: 24"
Location of the source of any surface wa	ater used for drilling:	Surface Water	a
Method of dosing and volume of Chlorin		velopment: 50 PPM	
-	5		
Loge run (check all applicable). M Me le	a run 🗖 Electric 🗖 Co	ma Ray 🗂 Density 🗖 Serie (
Logs run (check all applicable): X No lo	og run 🔲 Electric 🗌 Gan	nma Ray 🗍 Density 🗌 Sonic [Neutron 🗌 Other:
Logs run (check all applicable): 🛛 No lo	og run 🗋 Electric 🗋 Gan	nma Ray 🗍 Density 🗍 Sonic [Neutron 🗋 Other:
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Name of organization running log(s): Purpose of borehole (check one): \square V	Water Well Geotec		
Name of organization running log(s): Purpose of borehole (check one): X	Water Well	hnical/Geological Investigation	Ground Source Heat Pump
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Gray G Fine Sand 19 Fine Sand & Gravel 40	Office Use (Only:
f more than one screen, show location of each on sketch	<u>be provided for al</u> <u>y regulations</u>	<u>ll wells</u>
f more than one screen, show location of each on sketch	From (depth) Ground level	To (dep 18
f more than one screen, show location of each on sketch		39
f more than one screen, show location of each on sketch	40	58
f more than one screen, show location of each on sketch	59	127
Sketch the property layout and include the following:		
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Sketch the property layout and include the following:		
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 		

Landowner Name:		
I HEREBY CERTIFY that the well/borehole was drilled, co requirements of the Mississippi Department of Environmer if applicable, and state laws. 0695		Mississippi Department of Health regulations,
Print Name of Responsible Licensee and License No.	Date	Signature of Licenses

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

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By OLWR

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	STATE V	VELL REPORT	For C	Office Use Only:
County: Sunflower		Part 2	Well #:	T186
Permit #:		r's Completion Repor		
Driller: Irrigation Equipment, Inc.		nent of Environmental Qual d and Water Resources	ity Aquifer:	
Date drilling completed: 7-29-16	P.4	O. Box 2309		
Copy information from block on Part 1		n, MS 39225-2309 01) 961-5210		
	(601)) 360-0535 (fax)		
This part of the report must be completed				
of the report must be attached and both p Well Owner informat			<i>within 30 days o</i> Well Location	of well completion.
a Waatahaatahaa Oosaan O				00 221 26 28
Owner Name: Westchester Group - S		Latitude: <u>33 20' 11.2"</u>	Longitude	90 33 30.3
Mailing Address: 1207 Cardinal Circle)	Method of Lat/Long (chec	skone): 🗌 Co	onventional Survey,
		USGS quad, 🖾 Hand-	-held GPS, 🔲 S	Survey-grade GPS
Indianola MS	38751			
City State		<u> 377</u> % <u>NE</u>	¼, Sec <u>12</u> ⊤ <u>17</u>	
Telephone No. () -	-	Miles		Inverness
		(Distance) (D	Direction)	(Nearest Town)
	Pump Tyj	pe (check one)		
🗆 Submersible 🛛 Turbine 🗖 Air Lift 🗖 C	entrifugal 🔲 Flowing V	Nell 🔲 Jet 🔲 Piston 🔲 Rotar	ry 🗋 Other (des	cribe):
		Rated Pump Capacity: 2	000±	Gallons Per Minute
Date Pump Installed 1-29-16				
	paired 🗌 Replacemen	nt		
Is This Pump (check one): 🛛 New 🗌 Re	paired I Replacemen Power Ty	nt pe (check one)		
Is This Pump (check one): ⊠ New □ Re □ Electric ⊠ Diesel □ Gasoline □ Natur	paired I Replacemen Power Ty ral Gas I Tractor PTO	nt pe (check one)) [] Windmill [] Other (descri	ibe):	
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