

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)

County: TALLAHATCHIE
Permit #: GW-51649
Driller: CHAD MATTOX
Date drilling completed: 5/27/21

For Office Use Only:
Well #: A62
Aquifer: _____
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.

Well Owner Information <i>(Landowner if borehole is not for a water well)</i>	Well or Borehole Location
Owner Name: <u>C & E FARM</u>	Latitude: <u>34.156111</u> Longitude: <u>-90.095278</u>
Mailing Address: <u>9649 GRAYSPORT CROSSING ROAD</u>	Method of Lat/Long (check one): Conventional Survey <input type="radio"/> ,
<u>COFFEVILLE</u> MS <u>38922</u>	USGS quad <input type="radio"/> , Hand-held GPS <input type="radio"/> , Survey-grade GPS <input type="radio"/>
City State Zip Code	<u>NE</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$, Sec. <u>04</u> T <u>26N</u> R <u>02E</u>
Telephone No. (____) _____	<u>2</u> Miles <u>E</u> of <u>CROWDER</u>
	(Distance) (Direction) (Nearest Town)

Well / Borehole Data

Date drilling started: 5/27/21 Date drilling completed: 5/27/21 Hole depth: 100 Hole diameter: 24

Location of the source of any surface water used for drilling: NEARBY DITCH

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

Logs run (check all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: _____

Name of organization running log(s): _____

Purpose of borehole (circle 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 all applicable): Home Industrial Public Supply Irrigation Fish Culture

Other (describe): _____

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

Static Water Level: 35 feet above/ below land surface Date measured: 5/27/21
(select one)

Method of measurement (select one): Steel tape Electric tape Air line Other (describe): _____

Well depth: 100 Well grouted to a depth of: 10 feet Type of grout (select one): Neat Cement Bentonite Mix

Casing length: 60 feet Casing diameter: 16 inches Type of casing: PVC

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

Screen slot size: .032 inches Setting depth: From ~~70~~ 60 feet to 100 feet

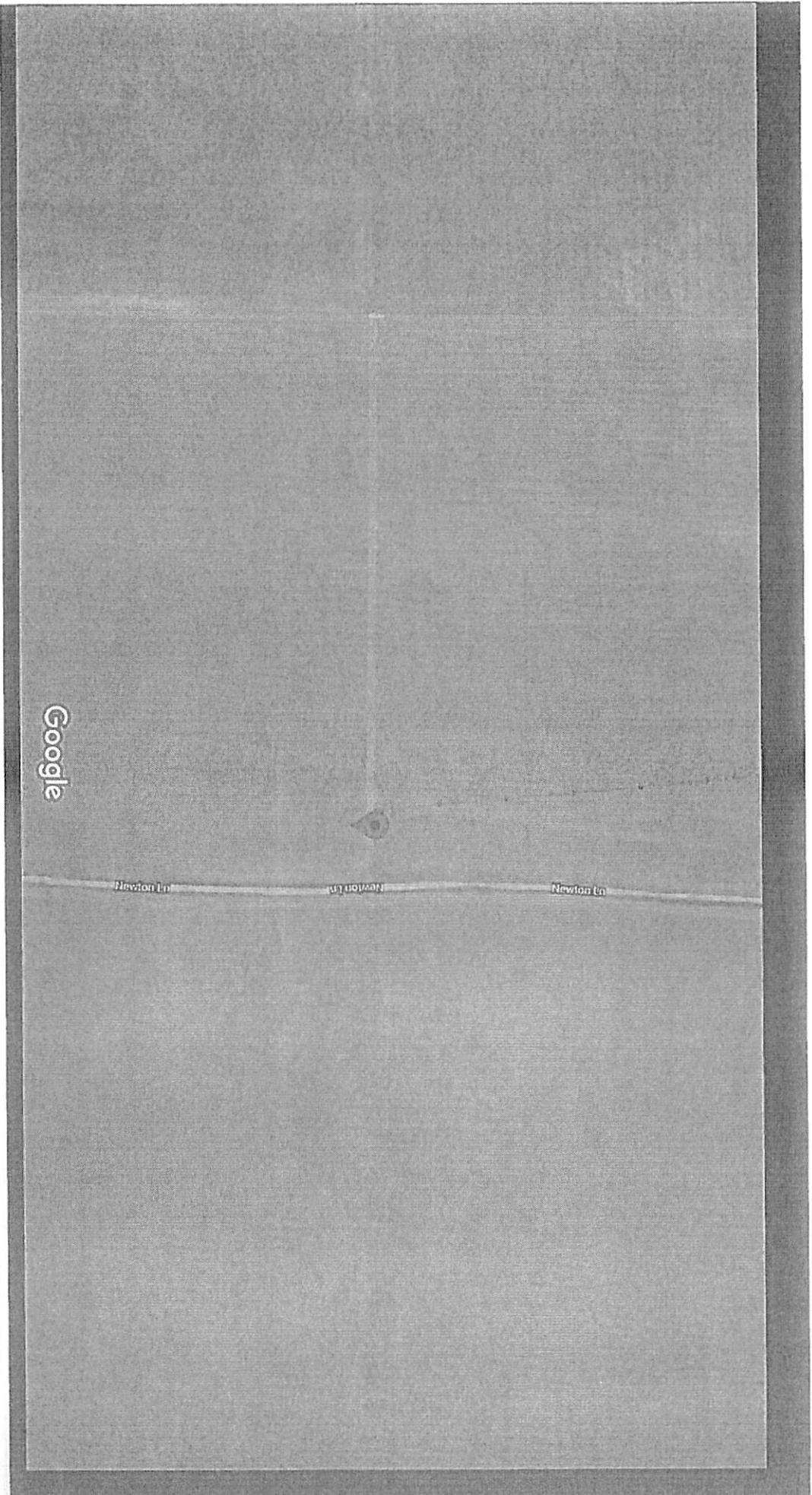
Type of completion (check all applicable): Gravel packed Underreamed Open hole Natural Development

Other (describe): _____

Top of lap pipe or reduction in casing: _____ feet

If telescoped or more than one screen, describe on next page

Google Maps 34°09'22.0"N 90°05'43.0"W



Google

Imagery ©2021 Maxar Technologies, State of Arkansas, USDA Farm Service Agency, Map data ©2021

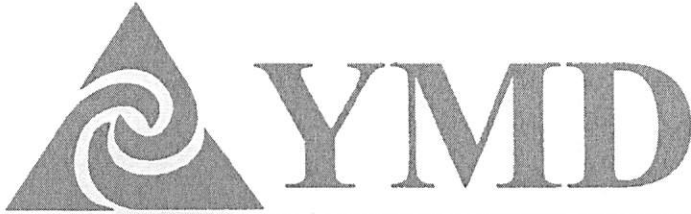
200 ft

RECEIVED

06-03-2021

By OLWR

https://www.google.com/maps/place/34°09'22.0"N+90°05'43.0"W/@34.1562576,-90.0960235,732m/data=!3m1!1e3!4m5!3m4!1s0x0:0x018m2:3d34:156111114d-90:0952778



21-0290
C & E

Don R. Christy, PhD
Executive Director
P. O. Box 129
Stoneville, MS 38776
Tel.: (662) 686-7712
Fax: (662) 686-9078
www.ymd.org

Yazoo Mississippi Delta Joint Water Management District

May 20, 2021



RE: CONSTRUCTION NOTICE

C & E Farm
9649 Graysport Crossing Road
Coffeeville, MS 38922

RE: Receipt for Notification of Construction of Replacement Well **MS-GW-51649**
which will be replacing GW-11457 well located at
Location: NE1/4 of the NW 1/4 Section 04 Township 26N Range 02E County Tallahatchie
Latitude: 34.156388N Longitude -90.095278

Dear C & E Farm:

This letter acknowledges your notification to the state that you intend to replace a previously permitted well in the Mississippi River Valley Alluvial Aquifer and that this replacement construction will meet the requirements for a groundwater replacement well specified in 11 Miss. Admin. Code Part 7, Chapter 1, Rule 1.4.F.1 (see attached/back of page). **Construction may begin immediately on your replacement well.**

Remember that you are still required to submit a permit application (enclosed) for the replacement well within 5 days of construction beginning. You are also required to properly decommission (plug and abandon) the replaced well within 180 days of the replacement well's construction.

A copy of this letter, or a water use permit for the replacement well, **must** be attached to the State Well Report submitted by your driller to MDEQ and they must also submit a copy to YMD, as specified in the Water Well Contractor regulations found in 11 Miss. Admin. Code Part 7, Chapter 2, Rule 2.9.

If you have any questions, please call YMD at 662-686-7712.

Sincerely,

Dillard Melton, Jr
Permitting Director