_{County:} Tallahatchie	State Well Report	For Office Use Only
County:	Part 1 Mississippi Department of Environmental Qu Office of Land and Water Resources	ality Aquifer:
Irrigation Equipment	Office of Land and Water Resources P.O. Box 10631	Well #: <u>J-102</u>
Driller:	Jackson, MS 39289-0631	L. S. Elevation:
Date drilling completed: $6-28-05$	(601)961-5210	E. 5. Elevation.
	(601)354-6938 (fax)	E-log #:
	ort be prepared by the driller in detail and f	iled with the Department wit
30 days of completion of drilling Well Owner Inform		Well Location
Owner Name SPP, LLC c/o Fischer Farm Serv	Latitude:	2 Longitude: 90, 19
c/o Fischer Farm Serv Mailing Address:	/ices Method of Lat/Long (ci	rcle one): Conventional Survey,
Box 926	USGS quad, Ha	d-held GPS, Survey-grade GPS
····		17 <u>Twn 24N Rng</u> 1
Aberdeen, MS	$\frac{z}{39730}$	
City Sta	te Zip Code Distance Direc	tion Nearest Town
662 - 369 - 9531	Miles	st_of_Webb
	Well Data	ure Other. placement
If flowing, method of flow regulation: Va	28-05 Date well drilling completed: Ive Other (describe)	6-28-05
If flowing, method of flow regulation: Va	lve Other (describe) pove or pelow (circle one) land surface Date measure	6-28-05 sured: 6-28-05
If flowing, method of flow regulation: Va Static Water Level: <u>20'</u> feet at Method of Measurement (circle one)	lve Other (describe) pove or below (circle one) land surface Date measure teel tape electric tape air line other:	6-28-05 sured: 6-28-05
If flowing, method of flow regulation: Va Static Water Level: <u>20'</u> feet at Method of Measurement (circle one)	lve Other (describe) pove or pelow (circle one) land surface Date measure	6-28-05 sured: 6-28-05
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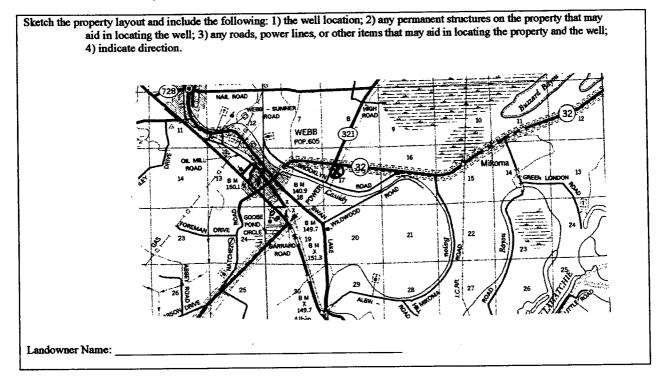
 If well telescopes please sketch below and show depths.

Ground Level

Description of Formations Encountered	From	To
	0	15
Brown Sand Med. Sand	16	55
Med. Sand/gravel	56	65
Fine Sand	66	75
Med. Sand/gravel	76	97
Screen 66-75		
Screen 66-75 Screen 78-97		
Screen /0-5/		
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J-102

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



Signature of Water Well Contractor

	STATE WELL REPORT	
County: Tallahatchie	Part 2 Pamp Installer's Completion Report	For Office Use Only:
Permit #: GW 40467	Mississippi Department of Environmental Quality Office of Land and Water Resources	Aquifer:
Irrigation Equipment	P.O. Box 10631 Jackson, MS 39289-0631	Well #: J-102
Date completed: <u>6-28-05</u>	(601)961-5210 (601)354-6938 (fax)	Elevation:

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This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump.

Well Owner Information	Well Location
Owner Name: SPP, LLC c/o Fischer Farm Services	Latitude: Longitude:
Mailing Address:	Method of Lat/Long (circle one): Conventional Survey,
Box 926	USGS quad, Hand-held GPS, Survey-grade GPS
Aberdeen, MS 39730 City State Zip Code	<u>SE 14 NW 14 Sec 17 Twn 24NRng 1W</u>
662-369-9531 Telephone No. ()	Distance Direction Nearest Town 1 Miles East of Webb

	Pump Type Circle one			Power Type Circle 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 Ratin	g of Motor:15	
Date Pump Installed:	6-2	8-05	Setting Depth:	55	feet
Rated Pump Capacity:	750	Gallons Per Minute	Number of Stages:	1	

Pump Test Data	Method of Measuring Water Level Circle one		
Date Well Tested:			
Static Water Level (A):Feet Below Land Surface	Air Line Electric Measuring Line Steel Tape		
Pumping Water Level (B):Feet Below Land Surface	Other (specify):		
Drawdown [(B) - (A)]:Feet Below Land Surface	For flowing well, measured shut in head:feet		
Test Pumping Rate:Gallons Per Minute	Well yielded GPM with a drawdown of		
Duration of Pump Test (minimum 4 hours):hours	feet afterhours of pumping		

I HEREBY CERTIFY that the above statements are true to the best of	of my knowledge.
Patrick M. Chism 0695	Patrick M Chim
Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY Office of Land and Water Resources	RECEIVED
P. O. Box 2309 Jackson, MS 39225	MAY 0 8 2019
Water Well Plugging/Decommissioning Form OLWR-DF-1 (04/08)	BYOLWR

COUNTY WELL LOCATED: Tallahatchie	WELL NUMBER: J102	
PERMIT NUMBER: GW-40467 DATE	WELL PLUGGED: 4-29-2019	
NAME OF FIRM PLUGGING WELL: Irrigation Equipment Inc	PHONE NUMBER: 662-887-2555	
NAME AND ADDRESS OF CURRENT LANDOWNER: Box 675 Webb MS 38966	SPP, LLC 662-466-3066	
WELL LOCATION: SECTION: 17 TOWNSHIP: 24	N RANGE: 1W	
WELL LOCATION: LATITUDE: LONGITUDE: METHO N33 57 02.0 W90 19 29.7	DD (CIRCLE ONE): (1) USGS QUAD (2) CONVENTIONAL SURVEY (3) GPS - HAND HELD OR SURVEY GRADE	
DISTANCE: DIRECTION: NEAREST TOWN: Webb	OTHER LANDMARK:	
WELL PURPOSE (HOME, IRRIGATION, MUNICIPAL, ETC.): Irrigation		
NAME OF WELL CONTRACTOR WHO DRILLED THE WELL:		
NAME OF LANDOWNER WHEN WELL WAS DRILLED:		
WELL DATA		
WELL DEPTH: 94Ft.	HOLE DEPTH:	
CASING DIAMETER (IN.): 10 CASING LENGTH (FT.):	TYPE OF CASING: PVC	
DEPTH TO STATIC WATER LEVEL: 31Ft. DATE WELL COM	PLETED:	
WHY IS THE WELL BEING ABANDONED? Landforming Fi	eld	
DESCRIBE HOW THE WELL OR HOLE WAS PLUGGED (AMOUNT OF CASING AND/OR SCREEN THAT WAS REMOVED OR LEFT IN HOLE, MATERIAL AND AMOUNT USED IN PLUGGING, METHOD OF PLACING MATERIAL, ETC.) Removed casing below ground level. Installed 5% chlorine		
bleach. Installed sand and gravel. Installed 750 pounds		

of bentonite hole plug.

I CERTIFY THAT THE WELL WAS PLUGGED OR ABANDONED IN ACCORDANCE WITH THE STATE OF MISSISSIPPI REGULATIONS. Patrick M Chism 0695 $\begin{array}{c} \text{ms license number} \\ 5-2-2019 \end{array}$ PRINT NAME SIGNATURE DATE

DEQ



Google Earth

feet meters

RECEIVED MAY 0 8 2019 BYOLWR

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