

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)

For Office Use Only:

Well #: B87
Aquifer: _____
E-Log #: _____

County: Tunica
Permit #: GW-47354 v3
Driller: Tommy Peacock
Date drilling completed: 5/2/14

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 (Landowner if borehole is not for a water well)			Well or Borehole Location	
Owner Name: <u>Ellis Family LP</u>			Latitude: <u>34°50'59"</u> Longitude: <u>90°16'20"</u>	
Mailing Address: <u>6715 Stonemill Drive</u>			Method of Lat/Long (check one): Conventional Survey _____	
City: <u>Knoxville</u> State: <u>TN</u> Zip Code: <u>37919</u>			USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____	
Telephone No. <u>(662) 363-0039</u>			<u>SE</u> ¼ <u>SW</u> ¼, Sec <u>04</u> T <u>03N</u> R <u>10W</u>	
			<u>2</u> Miles <u>west</u> of <u>Tunica</u>	
			(Distance) (Direction) (Nearest Town)	

Well / Borehole Data

Date drilling started: 5/2/14 Date drilling completed: 5/2/14 Hole depth: 115 Hole diameter: 26"
Location of the source of any surface water used for drilling: Ditch 1 mile west of well site
Method of dosing and volume of Chlorine used in drilling and development: Chlorinated in tank
Logs run (circle 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 (circle 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: _____ feet [above or below] land surface Date measured: _____
(circle one)
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe): _____
Well depth: 115 Well grouted to a depth of: 10 feet Type of grout (circle one): Neat Cement Bentonite Mix
Casing length: 75 feet Casing diameter: 16 inches Type of casing: PVC
Screen length: 40 feet Screen diameter: 16 inches Type of screen: PVC
Screen slot size: _____ inches Setting depth: From 75 feet to 115 feet
Type of completion (circle 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

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 39225-2309
 (601)961-5210
 (601) 360-0535 (fax)

For Office Use Only:

Well #: B87
 Aquifer: _____

County: TUNICA
 Permit #: GW-47354
 Driller: TOMMY PEACOCK
 Date completed: 5-2-14
 Copy information from block on Part 1

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>A & J PLANTING CO</u>	Latitude: <u>31° 50' 59"</u> Longitude: <u>90° 16' 20"</u>
Mailing Address: <u>P.O. BOX 2128</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
<u>TUNICA</u> <u>MS</u> <u>38636</u>	<u>SE 1/4</u> <u>SW 1/4</u> , Sec <u>04</u> <u>T 03N</u> <u>R 10W</u>
City State Zip Code	<u>3.3</u> Miles <u>NNE</u> of <u>ROBINSONVILLE</u>
Telephone No. <u>(662) 357-5400</u>	(Distance) (Direction) (Nearest Town)

Pump Type (circle one)

Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe): _____

Date Pump Installed: 5-22-14 Rated Pump Capacity: 3000 Gallons Per Minute

Is This Pump (circle one): New Repaired Replacement

Power Type (circle one)

Electric Diesel Gasoline Natural Gas Tractor PTO Windmill Other (describe): _____

Horse Power Rating of Motor: 60 Setting Depth: 70 feet Number of Stages: 1

Pump Test Data for Non Flowing Well

Date Well Tested: _____ Duration of Pump Test (minimum 4 hours): _____ hours

Static Water Level (A): _____ Feet Below Land Surface Pumping Water Level (B): _____ Feet Below Land Surface

Drawdown [(B) - (A)]: _____ Feet Below Land Surface Test Pumping Rate: _____ Gallons Per Minute

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

Pump Test Data for Flowing Well

Measured shut in head: _____ feet.

Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping

Meter Installation

Meter Manufacturer: N/A Meter Serial Number: _____

Meter Model Number/Name: _____ Type of Meter: _____

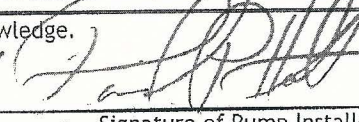
Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): _____

Installation Date: _____ Meter installed by: _____

Is This Meter (circle one): New Repaired Replacement

Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.

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

DAVID P. HOLT 0-752P 6-20-14 

Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer

Form: OLWR-SWR-1B (4/13)

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JUN 23 2014

BY: OLWR

14-0103

B87



Google earth



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MAY 28 2014

BY: OLWR

STATE OF MISSISSIPPI

Department of Environmental Quality

Office of Land and Water Resources

P. O. Box 2309

Jackson, Mississippi 39225

B87

PERMIT

TO DIVERT OR WITHDRAW FOR BENEFICIAL USE THE PUBLIC WATERS

This permit is issued to the landowner named below in accordance with the provisions of the Mississippi Water Laws, Mississippi Code Sections 51-3-1, et seq.(1972, as amended), and the regulations and standards as promulgated thereunder. Whether or not specifically named in this permit or in the applications for this permit, anyone using water from the diversion/withdrawal point described below shall do so in compliance with the provisions of this permit. Neither this permit, nor any authority conferred hereby, may be sold, conveyed, encumbered, assigned, or otherwise aliened, for any period of time or under any conditions whatsoever. This permit may not be modified, transferred or revoked without prior action by the Permit Board. Any attempts to modify, transfer or revoke this permit, or to take any other action on this permit, shall be invalid and unenforceable and may result in immediate revocation or suspension of this permit. The holder of this permit shall at all times be responsible for adherence to the terms and conditions of this permit. No agreement between the permit holder and any other party shall affect the obligations and liabilities of the permit holder. Water use under this permit is allowed only when the streamflow, lake level elevation, or static groundwater level (whichever, if any, is applicable) is above the established minimum, pursuant to Mississippi Code Section 51-3-7. Authorization is hereby granted to divert/withdraw water for the beneficial use designated herein, and for no other purpose, subject to the following terms, conditions, and limitations:

Permit Number: MS-GW-47354

Landowner Name: ELLIS FAMILY LP

Landowner Address: 6715 STONEMILL DRIVE
KNOXVILLE TN 37919

Source Of Water: MISSISSIPPI RIVER VALLEY ALLUVIAL AQUIFER

Beneficial Use: IRRIGATION

Diversion/Withdrawal Location: SE 1/4 of the SW 1/4 **Section:** 04 **Township:** 03N **Range:** 10W

County: TUNICA

Quad: ROBINSONVILLE

Maximum Volume: 158 Acre-Feet/Year *equivalent to* .141 Million Gallons/Day

Maximum Rate: 2800 Gallons/Minute

Applicant Name: A J PLANTING COMPANY

Applicant Address: PO BOX 2309
TUNICA MS 38676

Date Permit Issued: 06/17/2013

Date Permit Expires: 06/17/2018

Date Permit Modified:

Date Permit Re-issued:

This permit shall be deemed null and void if construction has not begun within one (1) year of permit issue date

SPECIAL TERMS AND CONDITIONS: SEE ATTACHMENT 1, WHICH IS HEREBY DECLARED TO BE PART OF THIS PERMIT.

SPECIAL TERMS AND CONDITIONS 2:

RECEIVED

MAY 28 2014

BY: OLWR

Richard B. Ingram

Richard B. Ingram
Office Director

CIRCLE IRRIGATION INC.

420 RAIN STREET
CLARKSDALE, MS 38614

1-800-447-7246 • 662-627-7246 • FAX 662-627-4757

RECEIVED

MAY 28 2014

BY: OLWR

B87

WELL DRILLING FORM

- (1) Job Name/Number 14-0103 A&J PLT BUDDYALLEN
- (2) Drilling Co. TOMMY PEACOCK
- (3) Well Size 16"
- (4) Location 61 SOUTH & DUNN RD 34 50 59N 90 16 20W
- (5) P.O. Number PO33832
- (6) Cost _____

NOTES:



VALLEY

Precision Irrigation Made Easy