

County: TUNICA
 Permit #: GW-51461
 Driller: CHAD MATTOX
 Date drilling completed: 4/12/21

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 #: F 45
 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 (Landowner if borehole is not for a water well)			Well or Borehole Location	
Owner Name: <u>LIMERICK FARMS</u>			Latitude: <u>34.6375</u>	Longitude: <u>-90.4288</u>
Mailing Address: <u>1100 EVANSVILLE COVE</u>			Method of Lat/Long (check one): Conventional Survey <input type="radio"/>	
			USGS quad <input type="radio"/> Hand-held GPS <input type="radio"/> Survey-grade GPS <input type="radio"/>	
<u>TUNICA</u>	<u>MS</u>	<u>38676</u>	<u>NE</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$, Sec <u>23</u> T <u>05S</u> R <u>12W</u>	
City	State	Zip Code	<u>1</u> Miles <u>E</u> of <u>EVANSVILLE</u>	
Telephone No. (____) _____			(Distance) (Direction) (Nearest Town)	

Well / Borehole Data	
Date drilling started: <u>4/12/21</u>	Date drilling completed: <u>4/12/21</u> Hole depth: <u>115</u> Hole diameter: <u>24</u>
Location of the source of any surface water used for drilling: <u>BEAVERDAM LAKE</u>	
Method of dosing and volume of Chlorine used in drilling and development: _____	
Logs run (check all applicable): <input checked="" type="checkbox"/> No log run <input type="checkbox"/> Electric <input type="checkbox"/> Gamma Ray <input type="checkbox"/> Density <input type="checkbox"/> Sonic <input type="checkbox"/> Neutron <input type="checkbox"/> Other: _____	
Name of organization running log(s): _____	
Purpose of borehole (circle one): <input checked="" type="radio"/> Water Well <input type="radio"/> Geotechnical/Geological Investigation <input type="radio"/> Ground Source Heat Pump	
<input type="radio"/> Seismic Survey <input type="radio"/> Other (describe) _____	
<i>If drilling is not related to water well construction, skip the remainder of this block</i>	
Purpose of Well (check all applicable): <input type="checkbox"/> Home <input type="checkbox"/> Industrial <input type="checkbox"/> Public Supply <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Fish Culture	
Other (describe): _____	
If a flowing well, method of flow regulation: Valve _____ Other (describe) _____	
Static Water Level: <u>11</u> feet <input type="radio"/> above/ <input checked="" type="radio"/> below land surface	Date measured: <u>4/12/21</u>
(select one)	
Method of measurement (select one): <input checked="" type="radio"/> Steel tape <input type="radio"/> Electric tape <input type="radio"/> Air line <input type="radio"/> Other (describe): _____	
Well depth: <u>115</u> Well grouted to a depth of: <u>10</u> feet	Type of grout (select one): <input type="radio"/> Neat Cement <input checked="" type="radio"/> Bentonite <input type="radio"/> Mix
Casing length: <u>75</u> feet	Casing diameter: <u>16</u> inches Type of casing: <u>PVC</u>
Screen length: <u>40</u> feet	Screen diameter: <u>16</u> inches Type of screen: <u>PVC</u>
Screen slot size: <u>.032</u> inches	Setting depth: From <u>70</u> feet to <u>115</u> feet
Type of completion (check all applicable): <input checked="" type="checkbox"/> Gravel packed <input type="checkbox"/> Underreamed <input type="checkbox"/> Open hole <input type="checkbox"/> Natural Development	
Other (describe): _____	
Top of lap pipe or reduction in casing: _____ feet	
<i>If telescoped or more than one screen, describe on next page</i>	

STATE OF MISSISSIPPI

Department of Environmental Quality

Office of Land and Water Resources

P.O.Box 2309

Jackson, Mississippi 39225

21-0017

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 or lake level elevation (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-51461

Total Permitted Acreage: 35

Landowner Name: LIMERICK FARMS

Landowner Address: 1100 EVANSVILLE COVE
WILL OWEN
TUNICA, MS 38676

Source of Water: MISSISSIPPI RIVER VALLEY ALLUVIAL AQUIFER

Beneficial Use(s): IRRIGATION

Diversion/Withdrawal Location: NE 1/4 of the NE 1/4 Section: 23 Township: 05S Range: 12W

County: TUNICA Quad: TUNICA MS

Permitted Acreage: Irrigation: 35 Fish Culture: 0 Wildlife Management: 0

Maximum Volume: See Special Terms And Conditions (attachment 1)

Applicant Name: LIMERICK FARMS

Applicant Address: 1100 EVANSVILLE COVE
WILL OWEN
TUNICA, MS 38676

Date Permit Issued: 03/04/2021

Date Permit Expires: 03/04/2026

Date Permit Modified:

Date Permit Reissued:

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

SPECIAL TERMS AND CONDITIONS 1:

The permitted water volume must be reduced by the amount of water applied to the same acreage from other permitted point(s): MS-GW-11780, MS-GW-11781, MS-GW-51464

SPECIAL TERMS AND CONDITIONS 2:

See Attachment 1 which is hereby declared part of this permit.

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MAY 04 2021

BY OLWR

Key Whty

Permit #: GW-51461

Well #:

[illegible][illegible]

RECEIVED
MAY 04 2021
BY OLW/E

Landowner Name:

CHAD MATTOX

UNR 8243

Print Name of Responsible Licensee and License No.

Date _____

Signature of Licensee

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

CIRCLE S IRRIGATION INC. TO INSTALL PUMP

Untitled Map

Write a description for your map.

Legend

RECEIVED
BY OLIVER

34.6375 -90.4288

Google Earth

© 2021 Google

1000 ft



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)

County: TUNICA
Permit #: GW-51461
Driller: CHAD MATTOX
Date completed: 4/12/21
Copy information from block on Part 1

For Office Use Only:

Well #: F 45
Aquifer: _____

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>LIMERICK FARMS</u>			Latitude: <u>34.6375</u>	Longitude: <u>-90.4288</u>
Mailing Address: <u>1100 EVANSVILLE COVE</u>			Method of Lat/Long (select one): Conventional Survey <input type="radio"/> , USGS quad <input type="radio"/> , Hand-held GPS <input checked="" type="radio"/> , Survey-grade GPS <input type="radio"/>	
<u>TUNICA</u>	<u>MS</u>	<u>38676</u>	<u>NE</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$, Sec <u>23</u> T <u>05S</u> R <u>12W</u>	
City	State	Zip Code		
Telephone No. (____) _____			<u>1</u> Miles <u>E</u> of <u>EVANSVILLE</u>	
			(Distance)	(Direction) (Nearest Town)

Pump Type (select one)
☒ Submersible ☐ Turbine ☐ Air Lift ☐ Centrifugal ☐ Flowing Well ☐ Jet ☐ Piston ☐ Rotary ☐ Other (describe): _____
 Date Pump Installed: 4/13/21 Rated Pump Capacity: 850 Gallons Per Minute
 Is This Pump (select one): ☒ New ☐ Repaired ☐ Replacement

Power Type (select one)
☒ Electric ☐ Diesel ☐ Gasoline ☐ Natural Gas ☐ Tractor PTO ☐ Windmill ☐ Other (describe): _____
 Horse Power Rating of Motor: 15 Setting Depth: 60 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): 11 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 (select 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: _____ 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	4/15/21	
Print Name of Pump Installer and License No. (if applicable)		Date	Signature of Pump Installer

Form: OLWR-SWR-2A (4/13)

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APR 16 2021
BY OLWR