

STATE WELL REPORT

116

County: Washington
 Permit #: 49843
 Driller: Charles M. Nichols
 Date drilling completed: 6-6-18

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)961-5555
 (601)961-5228 (fax)

For Office Use Only:

Well #: D 204
 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.

<p style="text-align: center;">Well Owner Information (Landowner if borehole is not for a water well)</p> <p>Owner Name: <u>Patrick Smith</u> Mailing Address: <u>Smith Farms</u> <u>Greenville</u> <u>MS</u> <u>38703</u> City State Zip Code Telephone No. (____) _____</p>	<p style="text-align: center;">Well or Borehole Location</p> <p>Latitude: <u>33° 22' 57.99"</u> Longitude: <u>91° 01' 09.44"</u> Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____ <u>NW</u> ¼ <u>NW</u> ¼, Sec. <u>29</u> T. <u>18N</u> R. <u>8W</u> _____ Miles _____ of _____ (Distance) (Direction) (Nearest Town)</p>
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Well / Borehole Data

Date drilling started: 6-6-18 Date drilling completed: 6-6-18 Hole depth: 90 Hole diameter: 24
 Location of the source of any surface water used for drilling: ditch
 Method of dosing and volume of Chlorine used in drilling and development: Hth
 Logs run (check all applicable): log run Electric Gamma Ray Density Sonic Neutron Other: _____
 Name of organization running log(s): _____
 Purpose of borehole (check 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: 8' 6" feet above or below land surface Date measured: 6-8-18
 Method of measurement (check one) Steel tape Electric tape Air line Other (describe): _____
 Well depth: 90 Well grouted to a depth of: 20 feet Type of grout (check one) Neat Cement Bentonite Mix
 Casing length: 50 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 _____ feet to _____ 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

RECEIVED
 JUL 15 2020
 BY OLWR

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 #: D 204
 Aquifer: _____

County: Washington
 Permit #: 49843
 Driller: Charles M. Nichols
 Date completed: 6-6-18
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>Patrick Smith</u>	Latitude: <u>33°22'57.99</u> Longitude: <u>91°01'09.44"</u>
Mailing Address: <u>Smith Farms</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
<u>Greenville</u> <u>MS</u> <u>38703</u>	<u>NW</u> ¼ <u>NW</u> ¼, Sec <u>29</u> T <u>18N</u> R <u>8W</u>
City State Zip Code	Miles _____ of _____ (Distance) (Direction) (Nearest Town)
Telephone No. (____) _____	

Pump Type (check one)

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

Date Pump Installed: 6-8-18 Rated Pump Capacity: 1,200 Gallons Per Minute

Is This Pump (check one): New Repaired Replacement

Power Type (check one)

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

Horse Power Rating of Motor: 40 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 (check 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 (check 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.

Charles Z. Nichols 9221 2-12-20 _____
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer

RECEIVED
 JUL 15 2020
 BY OLWR

STATE OF MISSISSIPPI
Department of Environmental Quality
Office of Land and Water Resources
P. O. Box 2309
Jackson, Mississippi 39225

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-49843

Landowner Name: SMITH FARMS

Landowner Address: 1263 NETHO DRIVE
GREENVILLE MS 38703

Source Of Water: MISSISSIPPI RIVER VALLEY ALLUVIAL AQUIFER

Beneficial Use: IRRIGATION

Diversion/Withdrawal Location: NW 1/4 of the NW 1/4 **Section:** 29 **Township:** 18N **Range:** 08W

County: WASHINGTON

Quad: GREENVILLE

Maximum Volume: 111 Acre-Feet/Year *equivalent to* .0991 Million Gallons/Day

Maximum Rate: 2000 Gallons/Minute

Applicant Name: SMITH FARMS

Applicant Address: 1263 NETHO DRIVE
GREENVILLE MS 38703

Date Permit Issued: 03/20/2017

Date Permit Expires: 03/20/2022


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:


Gary C. Rikard, Executive Director
Mississippi Department of Environmental Quality

RECEIVED
JUL 15 2020
BY OLWR

Patrick Smith Beauchamp

Beauchamp Rd

RECEIVED
JUL 16 2011
BY OLIVER