

STATE WELL REPORT

Part I

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 #: A90
 Aquifer: _____
 E-Log #: _____

County: YAZOO
 Permit #: GW-47653
 Driller: Clarence McMurran
 Date drilling completed: 9-3-13

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>Phillip Beathers Farm</u>	Latitude: <u>32° 58' 34.55"</u> Longitude: <u>90° 23' 37.18"</u>
Mailing Address: <u>4024 Money Sunk Rd</u>	Method of Lat/Long (check one): Conventional Survey _____
<u>Yazoo City</u> <u>MS</u> <u>39194</u>	USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
City State Zip Code	<u>SE 1/4 NW 1/4, Sec 15 T 13N R 02W</u>
Telephone No. <u>(662) 746-4408</u>	Miles _____ of _____ (Distance) (Direction) (Nearest Town)

Well / Borehole Data

Date drilling started: 9-3-13 Date drilling completed: 9-3-13 Hole depth: 118' Hole diameter: 26"

Location of the source of any surface water used for drilling: near by well

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

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) N/A

Static Water Level: 23 feet (above or below) land surface Date measured: 9-6-13
(circle one)

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

Well depth: 116' Well grouted to a depth of: _____ feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 66 feet Casing diameter: 16 inches Type of casing: PVC

Screen length: 50 feet Screen diameter: 16 inches Type of screen: PLC

Screen slot size: .050 inches Setting depth. From 66 feet to 116 feet

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

Other (describe): _____

Top of lap pipe or reduction in casing: N/A feet

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

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BY: OLWR

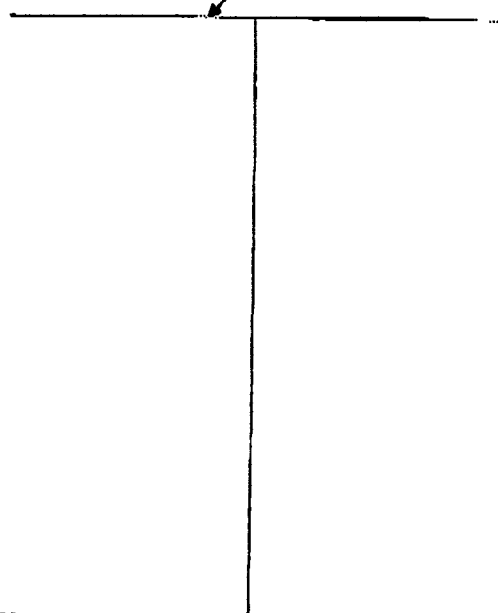
County: Yazoo
Permit #: GW-47653

For Office Use Only:
Well #: A90

The sketch below only required for water wells

If well telescopes, show depths on sketch.

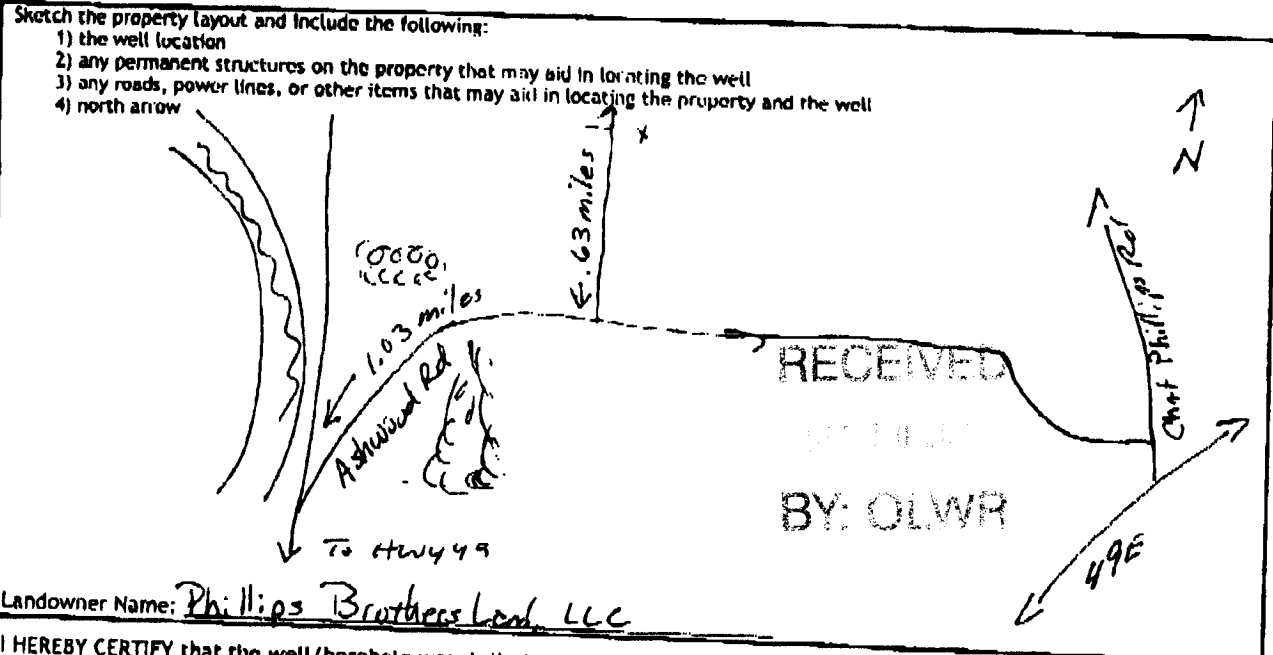
Ground Level



Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth)	To (depth)
Clay	Ground level	28
Fine Sand	28	63
Medium Sand	63	76
Medium Coarse Sand	76	
Blue Gravel		100
Medium Sand	100	107
Medium Coarse Sand & Gravel	107	
Clay	116	118

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



Landowner Name: Phillips Brothers Land LLC

I HEREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state laws.

Clayton Miller 0-703 9-10-13 Clayton Miller
Print Name of Responsible Licensee and License No Date Signature of Licensee

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 #: A90

Aquifer: _____

County: YAZOO
 Permit #: GW-47653
 Driller: John Rybalt IV
 Date completed: 9-6-13
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>Phillip Brothers Farm</u>		Latitude:	<u>32° 58' 34.55"</u> Longitude: <u>90° 23' 32.18"</u>
Mailing Address:	<u>4024 Money Snake Rd</u>		Method of Lat/Long (check one):	Conventional Survey _____
<u>Yazoo City</u>	<u>MS</u>	<u>39194</u>	USGS quad _____	Hand-held GPS <input checked="" type="checkbox"/> Survey-grade GPS _____
City	State	Zip Code	<u>SE</u> 1/4 <u>SW</u> 1/4, Sec <u>15</u> T <u>13N</u> R <u>02W</u>	_____ Miles _____ of _____
Telephone No. <u>(662) 746-4408</u>			(Distance)	(Direction) (Nearest Town)

Pump Type (circle one)

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

Date Pump Installed: 9-6-13 Rated Pump Capacity: _____ 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: _____ Setting Depth: 70 feet Number of Stages: 2

Pump Test Data for Non Flowing Well

Date Well Tested: NOT TESTED Duration of Pump Test (minimum 4 hours): N/A hours

Static Water Level (A): 23 Feet Below Land Surface Pumping Water Level (B): N/A Feet Below Land Surface

Drawdown [(B) - (A)]: N/A Feet Below Land Surface Test Pumping Rate: N/A 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: McCrometer Meter Serial Number: 13-03131-08

Meter Model Number/Name: M0308 Type of Meter: Propeller / Saddle

Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc.): gal x 100

Installation Date: 9-6-13 Meter installed by: Mid-South Water Machine Works, LLC

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.

Clayton Miller D-703 9-10-13 Clayton Miller
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer

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

BY OLWR