

Top of lap pipe or reduction in casing: _____ feet. *If telescoped or more than one screen, describe on next page*

Other (describe): _____

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

Screen slot size: .032 inches Setting depth: From 88 feet to 127 feet

Screen length: 40 feet Screen diameter: 16 inches Type of screen: PVC

Casing length: 87 feet Casing diameter: 16 inches Type of casing: PVC

Well depth: 127 feet Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Method of Measurement (circle one): steel tape electric tape air line other: _____

Static Water Level: 8' feet above or below (circle one) land surface Date measured: 9-13-2011

If a flowing well, method of flow regulation: Valve _____ Other (describe) _____

Purpose of Well (check one): Home _____ Industrial _____ Public Supply _____ Irrigation Fish Culture _____ Other: _____

If drilling is not related to water well construction, ship the remainder of this block

Purpose of borehole (check one): Water Well Geotechnical/Geological Investigation _____ Ground Source Heat Pump _____

Seismic Survey _____ Other (describe) _____

Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: _____

Name of organization running log(s): _____

Location of the source of any surface water used for drilling: Surface Water

Method of dosing and volume of Chlorine used in drilling and development: 50 PPM

Date drilling started: 9-13-11 Date drilling completed: 9-13-11 Hole depth: 127 Hole diameter: 24"

Well / Borehole Data

9-13-11

Information on Well Owner
 (Landowner if borehole is not for a water well)
 U.S. Fish & Wildlife Service
 Owner Name
 St. Catherine Creek NWR
 Mailing Address:
 76 Pintail Lane
 Natchez MS 39120
 City State Zip Code
 601-442-6696
 Telephone No. () _____

USGS quad, Hand-held GPS, Survey-grade GPS
 NW 1/4 SW 9 1/4 Sec 9 T4N R3W
 Distance _____ Miles Direction _____ of Sibley
 Nearest Town
 Method of Lat/Long (circle one): Conventional Survey, _____
 Latitude: 31 20 24.8N Longitude: 91 26 46.2W
 Well or Borehole Location

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.

For Office Use Only:

Acquirer: _____ Well #: NA26 L.S. Elevation: _____ E-log #: _____

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
 (601)961-5210
 (601)961-5228 (fax)

County: Adams
 Permit #: 010913
 Driller: _____
 Date drilling completed: 9-13-2011

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
(601)961-5210
(601)961-5228 (fax)

County: Adams

Permit #: _____
Driller: _____
Irrigation Equipment _____
Date completed: 9-13-2011
Get information from block on Part 1

For Office Use Only:

Aquifer: _____
Well #: _____
Elevation: _____

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.

U.S. Fish & Wildlife Service
Well Owner Information

Owner Name: St. Catherine Creek NWR
Mailing Address: 76 Pintail Lane
Natchez MS 39120
City State Zip Code _____
Telephone No. () _____

Well Location 31 20 24.8N 91 26 46.2W

Latitude: _____ Longitude: _____

Method of Lat/Long (check one): Conventional Survey _____
USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____

Distance _____ Miles Direction _____ of _____
Nearest Town _____

Pump Type _____
Circle one

Air Lift _____
Jet _____
Submersible _____

Bucket _____
Piston _____
Turbine _____

Centrifugal _____
Rotary _____
Flowing Well _____

Other (specify): _____

Date Pump Installed: 9-13-2011
Rated Pump Capacity: 2500± Gallons Per Minute

Power Type _____
Circle one

Miscel Engine _____
Electric Motor _____
Hand _____
Gasoline Engine _____
Natural Gas _____

Windmill _____
Other (specify): _____

Horse Power Rating of Motor: 60
Setting Depth: 80 feet
Number of Stages: 1

Pump Test Data

Date Well Tested: _____

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

Duration of Pump Test (minimum 4 hours): _____ hours

Method of Measuring Water Level _____
Circle one

Air Line _____
Electric Measuring Line _____
Steel Tape _____

Other (specify): _____

For flowing well, measured shut in head: _____ feet

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

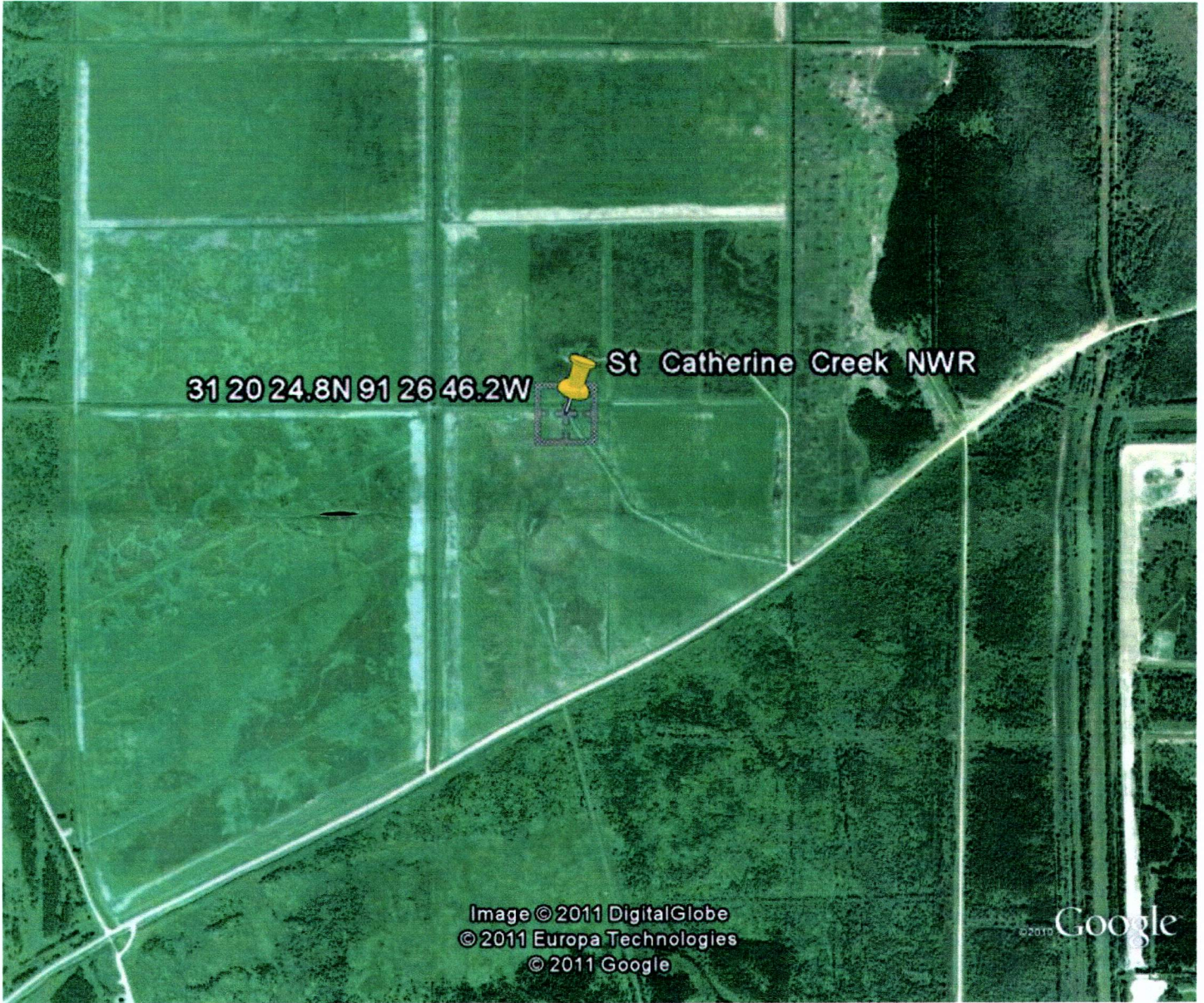
This is for (circle one): New Well Replacement of Existing Pump Repair of Existing Pump

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

Patrick M. Chism 0695

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

Signature of Pump Installer



RECEIVED

SEP 30 2011

BY: OLWR