

State Well Report

Part 1 - Driller's Log

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 10631
Jackson, MS 39289-0631
(601)961-5210
(601)354-6938 (fax)

County: DeWitt
 Permit #: _____
 Driller: WILSON WELL - JOHN LAW
 Date drilling completed: 12-7-07

For Office Use Only:

Aquifer: _____
 Well #: C-32
 L. S. Elevation: _____
 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.

Information on Well Owner <i>(Landowner if borehole is not for a water well)</i>	Well or Borehole Location
Owner Name: <u>WINSTON FARMS LLC</u>	Latitude: <u>34° 58' 59"</u> Longitude: <u>89° 04' 44"</u>
Mailing Address: <u>P.O. Box 772899</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
<u>MEMPHIS</u>	<u>1/4</u> <u>1/4</u> Sec <u>22</u> Twn <u>15</u> Rng <u>2E</u>
<u>TENNESSEE</u> <u>38177</u>	Distance Direction Nearest Town
City State Zip Code	Miles of _____
Telephone No. <u>(901) 461-8285</u>	

Well / Borehole Data

Date drilling started: 12-7-07 Date drilling completed: 12-7-07 Hole depth: 115 Hole diameter: 4

Location of the source of any surface water used for drilling: PUBLIC SUPPLY

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

Logs run (circle all applicable): No 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 one): Home Industrial Public Supply Irrigation Fish Culture Other: _____

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

Static Water Level: 50 feet above or below (circle one) land surface Date measured: 12-7-07

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

Well depth: 110 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 100 feet Casing diameter: 4 inches Type of casing: PVC Plastic Pipe

Screen length: 10 feet Screen diameter: 4 inches Type of screen: PVC Plastic Pipe

Screen slot size: .010 inches Setting depth: From 100 feet to 110 feet

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

Top of lap pipe or reduction in casing: NA 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 10631

Jackson, MS 39289-0631

(601)961-5210

(601)354-6938 (fax)

County: DELRID

Permit #: _____

Driller: (L) LEON LEEK - JENU LR

Date completed: 12-7-07

Copy information from block on Part 1

For Office Use Only:

Aquifer: _____

Well #: C-32

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.

Well Owner Information

Owner Name: WILSON FRANKS LLC

Mailing Address: P.O. Box 772899

Memphis

City: Memphis State: _____ Zip Code: 38177

Telephone No. (501) 461-8285

Well Location

Latitude: _____ Longitude: _____

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

Distance: _____ 1/4 Sec 22 T 15 R 2E

Direction: _____ Nearest Town: _____

Miles _____ of _____

Pump Type

Air Lift Jet Submersible

Bucket Piston Turbine

Centrifugal Rotary Flowing Well

Other (specify): _____

Date Pump Installed: 12-8-07

Rated Pump Capacity: 22 Gallons Per Minute

Power Type

Diesel Engine Gasoline Engine Natural Gas

Electric Motor Hand Tractor PTO

Windmill Other (specify): _____

Horse Power Rating of Motor: 1 1/2

Setting Depth: 100 feet

Number of Stages: 12

Pump Test Data

Date Well Tested: 12-2-07

Static Water Level (A): 50 Feet Below Land Surface

Pumping Water Level (B): 100 Feet Below Land Surface

Drawdown (B) - (A): 50 Feet Below Land Surface

Test Pumping Rate: 22 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): Pic Plastic Pipe

For flowing well, measured shut in head: _____ feet

Well yielded _____ GPM with a drawdown of _____

_____ feet after _____ hours of pumping

Print Name of Pump Installer and License No. (if applicable) Rodney D. Walker, 0-418

Signature of Pump Installer Rodney D. Walker

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