

County: Bolivar
Permit #: GLW-45179
Driller: Irrigation Equipment
Date drilling completed: 6-18-11

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

For Office Use Only:
Aquifer: A132
Well #: _____
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
(Landowner if borehole is not for a water well)

Owner Name Burford Lake Planting
Mailing Address: P.O. Box 65
Vance Ms. 38964
City State Zip Code
Telephone No. () _____

Well or Borehole Location

Latitude: 34° 03' 25.3" Longitude: 90° 46' 23.3"
Method of Lat/Long (circle one): Conventional Survey,
USGS quad, Hand-held GPS Survey-grade GPS
NW 1/4 NE 1/4 Sec 12 Twn 25N Rng 6W
SW Distance Direction Nearest Town
2 Miles NW of Duncan

Well / Borehole Data

Date drilling started: 6-18-11 Date drilling completed: 6-18-11 Hole depth: 116 Hole diameter: 20"

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

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: 21 feet above or below (circle one) land surface Date measured: 6-20-11

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

Well depth: 116 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 76 feet Casing diameter: 12 inches Type of casing: PVC

Screen length: 40 feet Screen diameter: 12 inches Type of screen: PVC

Screen slot size: .050 inches Setting depth: From 77 feet to 116 feet

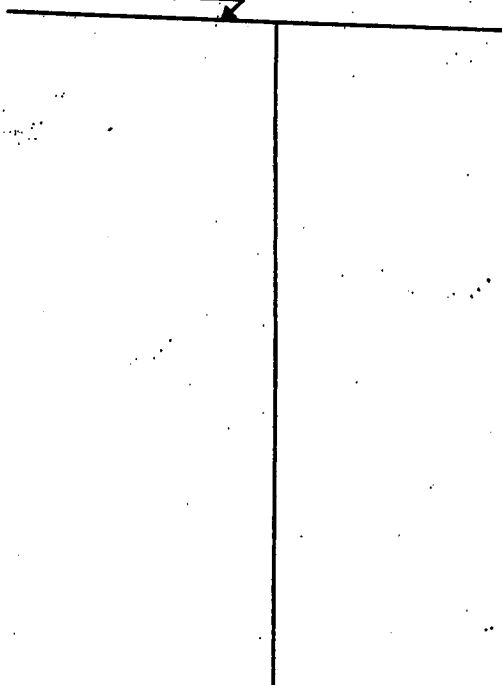
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development
Other (describe): _____

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

The sketch below only required for water wells

If well telescopes, show depths on sketch

Ground Level →



H132
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 | 16 |
| Fine Sand | 17 | 37 |
| Fine Sand + Gravel | 38 | 64 |
| Medium Sand + Gravel | 65 | 116 |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

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

Sketch the property layout and include the following: 1) the well location; 2) any permanent structures on the property that may aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and the well; 4) a north arrow.

Landowner Name: Burford Lake Planting

Form: OLWR-SWR-1A (04/08)

I 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.

Patrick M. Chism 0695

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

County: Bolivar
 Permit #: GW-4517
 Irrigation Equipment
 Driller: _____
 Date completed: 6-18-11
 (Copy information from block on Part 1)

For Office Use Only:
 Aquifer: _____
 Well #: A132
 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: Burford Lake Planting
 Mailing Address: P.O. Box 65
 City: Vance Ms. 38964
 State: _____ Zip Code: _____
 Telephone No. (____) _____
 Well Location
 Latitude: _____ Longitude: _____
 Method of Lat/Long (check one): Conventional Survey
 USGS quad Hand-held GPS Survey-grade GPS
 Direction: NW of Duncan
 Distance: 2 Miles
 Nearest Town: _____
NW 1/4 NE 1/4 Sec 12 T25N R 6W

Pump Type
 Air Lift Jet Submersible
 Bucket Piston Turbine
 Centrifugal Rotary Flowing Well
 Other (specify): _____
 Date Pump Installed: 6-20-11
 Rated Pump Capacity: 1600 ± Gallons Per Minute
 Horse Power Rating of Motor: 40
 Setting Depth: 60 feet
 Number of Stages: 1
 Power Type
 Diesel Engine Gasoline Engine Hand Tractor PTO
 Electric Motor Windmill Other (specify): _____

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
 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

A132

34°03'25.3"N 90°46'23.3"W



Google

© 2011 Google

Image © 2011 DigitalGlobe

Imagery Date: 3/11/2008

34°03'25.6"N 90°46'24.8"W Elev: 150 ft

Eye at: 9851 ft

RECEIVED

JUN 2 9 2011

BY DARR



Dean A. Pennington, PhD
Executive Director
P. O. Box 129
Stoneville, MS 38776
Tel.: (662) 686-7712
Fax: (662) 686-9078
www.ymd.org

Yazoo Mississippi Delta Joint Water Management District

A132

June 15, 2011

Burford Lake Planting / John Seely
P O Box 65
Vance MS 38964

RE: Well Construction / Drilling

Permit No: GW-45179

Dear **Burford Lake Planting**,

This authorization letter is for the construction of a new well that is to be drilled in the Mississippi River Valley Alluvial Aquifer. Your application has been received and is currently being processed.

Location: SW1/4 of the NE1/4 Section 12 _ Township 25N _ Range 06W _ County Bolivar

A copy of this notice or a water use permit **must** be attached to the State Well Report. This report is a requirement of the State Well Drillers Regulation. A copy of this report **must** be mail or faxed to YMD Joint Water Management District.

If you have any questions please call our office at 662/686-7712.

Sincerely,

Dillard Melton Jr.
Permitting Director

RECEIVED

JUN 28 2011

BY [signature]