

State Well Report

Part 1

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)

For Office Use Only:

Aquifer: N 161
 Well #: _____
 L. S. Elevation: _____
 E-log #: _____

County: Bolivar
 Permit #: GL-47402
 Driller: J. NEWCOME 0-773
 Date drilling completed: 5-13-2013

State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.

Well Owner Information	Well Location
Owner Name: <u>DELTA PINE LAND MANAGEMENT, LLC</u>	Latitude: <u>33° 30' 50"</u> Longitude: <u>091° 05' 53"</u>
Mailing Address: <u>P.O. Box 5669</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>
<u>GREENVILLE</u> <u>MS</u> <u>38702</u>	USGS quad, <u>Hand-held GPS</u> Survey-grade GPS
City State Zip Code	<u>SE 1/4 SE 1/4 Sec 03</u> Twn <u>21N</u> Rng <u>09W</u>
Telephone No. () _____	Distance Direction Nearest Town <u>5</u> Miles <u>West</u> of <u>Scott</u>

Well Data

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

Date well drilling started: 5-13-13 Date well drilling completed: 5-13-13

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

Static Water Level: _____ feet above or below (circle one) land surface Date measured: _____

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

Hole depth: 113 Well depth: 110 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 70 feet Casing diameter: 16 inches Type of casing: PVC

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

Screen slot size: .050 inches Setting depth: From 70 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: _____ feet. If telescoped or more than one screen, describe on back of page

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

Name of organization running log(s): _____

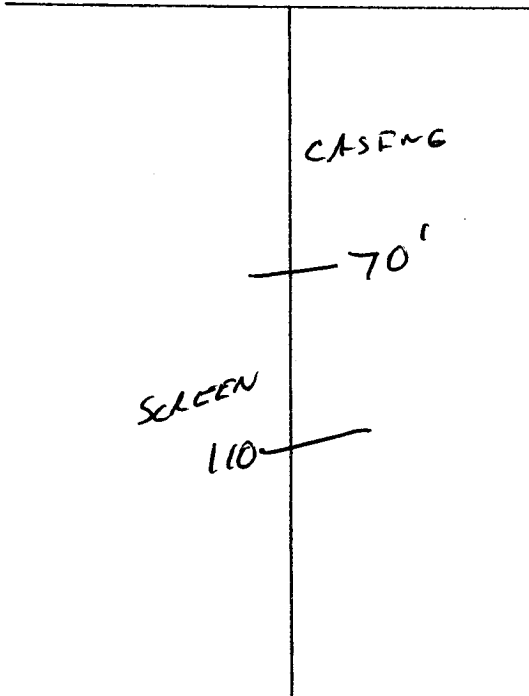
I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

JOHN NEWCOME 0-773 _____
 Print Name of Water Well Contractor and License No. Signature of Water Well Contractor

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If well telescopes please sketch below and show depths.

Ground Level



Description of Formations Encountered	From	To
TOP SOIL	0	10
MIX CLAY	10	40
FINE SAND	40	50
COARSE SAND	50	110
ROCKS - GRAY CLAY	110	113

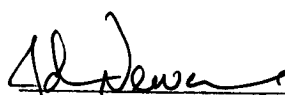
If more than one screen, show location of each on sketch

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) indicate direction.

See MAP

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Landowner Name: _____



Signature of Water Well Contractor

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STATE WELL REPORT

County: Bolivar
 Permit #: GW-47402 /
 Driller: S. Newcome 0773
 Date completed: 5/13/2013
Copy information from block on Part 1

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 #: N161
 Aquifer: _____

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>Delta Pine Land Management, LLC</u>	Latitude: <u>33.38.58</u> Longitude: <u>91.05.53</u>
Mailing Address: <u>P.O. Box 5669</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
<u>Greenville</u> <u>MS</u> <u>38702</u>	<u>SE 1/4 SE 1/4, Sec 03 T21N R09W</u>
City State Zip Code	<u>5</u> Miles <u>West</u> of <u>Scott</u>
Telephone No. () _____	(Distance) (Direction) (Nearest Town)

Pump Type (circle one)
 Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe): _____
 Date Pump Installed: 5/24/13 Rated Pump Capacity: 2500 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: 60^{HP} Setting Depth: 70 feet Number of Stages: 1

Pump Test Data for Non Flowing Well
 Date Well Tested: Not tested Duration of Pump Test (minimum 4 hours): _____ hours
 Static Water Level (A): Not tested 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 (circle one): Steel tape Electric tape Air line Other (describe): _____

Pump Test Data for Flowing Well
 Measured shut in head: _____ feet. Not tested
 Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping

Meter Installation
 Meter Manufacturer: McCrometer Meter Serial Number: 13-05086
 Meter Model Number/Name: M0310 Type of Meter: SADDLE
 Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): AF x .001
 Installation Date: 6/7/13 Meter installed by: Chicot Irrigation
 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.
Hubbard Stephens 741-P 6/26/13 Hubbard Stephens
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer

N161



Google earth



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