4	State Well Report		<b>31</b>			
County: Bolivar	Part 1 – Driller's Log		For Office Use Only:			
	Mississippi Department of Environmental Quality		Aquifer: P195			
Permit #: <u>GW43575</u>	Office of Land and Water Resources		N .			
Driller: Cook Dulling Co., Inc.	_	Box 2309	Well #:			
		n, MS 39225 961- 5210	L. S. Elevation:			
Date drilling completed: //-28-69		1- 5228 (fax)				
	(00.)55. 0225 (165.)		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 C		Well or Borehole Location				
(Landowner if borehole is not fo	A -	Latitude: 33.40.489 Longitude 90.47 195				
Owner Name Wattand 7a	mas suc.	/				
		Method of Lat/Long (circle one): Conventional Survey,				
Mailing Address: 65% Howa	ra ha.	LIGOR I II. A bald ODG Community CDC				
			USGS quad, Hand-held GPS, Survey-grade GPS			
Bordo NS. 38730 City State Zip Code		SE 1/ SE 1/ Sec /\ Twn 2/N Rng ( W				
		Distance Direction Nearest Town  3 Miles S of S 4 2 7 9 121				
Telephone No. (662) 719-12	9.3	Miles	or Sheene 12]			
reseptione No. (DBG) 111-12	1					
	Well / Bore	hole Data				
Mov. d8-09  Well / Borehole Data  99  Date drilling started: Hole diameter: 26  Hole diameter: 26						
Date drilling started: Date dri	lling completed:	28 Hole depth: / 1	Hole diameter.			
Location of the source of any surface used for drilling:						
Location of the source of any surface well used for drilling: 0/0/4/9/9/						
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						
ruipose oi coleinole (elicex olic). Water Weit George illinear George Britannia de Grant Source Frant Fumb						
Seismic SurveyOther (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 (frigation) Fish Culture Other:						
ruipose of well (check offer frome moustriat ruone supply imganon rish culture Other						
If a flowing well, method of flow regulation: Valve Other (describe)						
Static Water Level: 45 feet above or below (circle one) land surface Date measured: 706, 78 09						
Method of Measurement (circle one) steel tape electric tape air line other:						
Well depth: 120 Well grouted to a depth of 15 feet Type of grout (circle one): Neat Cement Bentonite Mix a						
Casing length:						
Screen length: 40 feet Screen diameter: 16 inches Type of screen: 15 VL						
Screen slot size: 050 inches Setting depth: From 80 feet to 120 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:	fect. <u>If tel</u>	lescoped or more than one scree	m, describe on next page			

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

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JAN 15 2010

The sketch below only required for water wells	<u>Descrip</u>	tion of formations encou id boreholes, unless spec	ntered mi	ust be provided	for all
If well telescopes, show depths on sketch.					
Ground Level	Descriptio	n of Formations Encount			To (depth)
		GAY C		Ground Level	36
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17	-				<del>                                     </del>
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If more than one screen, show location of each on sket	tch				
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ketch the property layout and include the following: 1) the aid in locating the well; 3) any roads, power l	ines or other item	any permanent structures e that may aid in locating	the prope	operly lital illay	ı. İ
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andowner Name: Watterd Farms	mc.				
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	,			OLWR-SWR-1	
ertify that the well/borehole was drilled, constructed, a					
ississippi Department of Environmental Quality and t	he Mississippi De	partment of Health regu	dations, i	f applicable, ar	nd state
we. Lo.			· /	0	ſ
OOK Philling me 28	KA11 20	N9 /	MA	V mo	and the property of
evul y a fill ty		Signature o	Clinana	TE ST	
rint Name of Responsible Licensee and License No.	Date	Signature o	License	· Andrews	
				JAN	2010

STATE WELL REPORT					
Permit #:  Driller Look Dulland., Inc.  Date completed: 11-28-09  Pamp Installer's Mississippi Department Office of Land a P.O. I Jackson (601)	Completion Report t of Environmental Quality and Water Resources Box 2309 , MS 39225 961-5210 1-5228 (fax)  Contractor or a licensed pump installer. A copy of Part 1 of the athe above address within 30 days of well completion.  Well Location  Latitude: 73-40 495 ongitude: 90 42 085  Method of Lat/Long (check one): Conventional Survey,  USGS quad, Hand-held GPS, Survey-grade GPS				
Telephone No. 662) 719-1292	Distance Direction Nearest Town  3 Miles 5 6 5 6 200 78				
Pump Type Circle one  Air Lift Jet Submersible  Bucket Piston  Centrifugal Rotary Flowing Well  Other (specify):  Date Pump Installed: 28 09  Rated Pump Capacity:	Power Type Circle one  Diesel Engine Gasoline Engine Natural Gas  Electric Motor Hand Tractor PTO  Windmill Other (specify):  Horse Power Rating of Motor:  Setting Depth:  Mumber of Stages:  I feet				
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 teel Tape  Other (specify):  For flowing well, measured shut in head:  Well yielded GPM with a drawdown of  feet after hours of pumping				
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.  COCK D1 /// Aginc 189  Print Name of Pump Installer and License No. (if applicable)  Signature of Pump Installer  Form: OLWR-SWR-1B (04/08)					

JAN 15 2010 BY: OLWR