

Bolivar

County: Circle H JV
 Permit #: GW-44516
 Driller: Cook Drilling Co. Inc.
 Date drilling completed: 9-4-10

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: P 204
 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.

<p>Information on Well Owner (Landowner if borehole is not for a water well)</p> <p>Owner Name <u>Circle H JV</u> Mailing Address: <u>684 Laughlin Rd.</u> <u>Cleveland Ms. 38732</u> City State Zip Code Telephone No. <u>(662) 843-5842</u></p>	<p>Well or Borehole Location</p> <p>Latitude: <u>33° 41' 56" N</u> Longitude: <u>90° 49' 26" W</u> Method of Lat/Long (circle one): Conventional Survey. USGS quad, Hand-held GPS, Survey-grade GPS <u>SW 1/4 NE 1/4 Sec 4 Twn 21N Rng 06W</u> Distance Direction Nearest Town <u>2 Miles W of Skena Ms</u></p>
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Well / Borehole Data

Date drilling started: Sept 4 10 Date drilling completed: Sept 4 Hole depth: 120 Hole diameter: 26

Location of the source of any surface water used for drilling: Boyle & Skena Water Ass.
 Method of dosing and volume of Chlorine used in drilling and development: _____

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: 43 feet above or below (circle one) land surface Date measured: SEPT 4-10
 Method of Measurement (circle one) steel tape electric tape air line other: _____

Well depth: 120 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix
 Casing length: 80 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 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: _____ feet. *If telescoped or more than one screen, describe on next page*

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

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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: DeLaware
 Permit #: GW 44516
 Driller: Cook Drilling Co., Inc.
 Date completed: 9-5-10
Copy 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.

Well Owner Information	Well Location
Owner Name: <u>Circle H IV</u>	Latitude: <u>33-41-9.42</u> Longitude: <u>90-49-44.4W</u>
Mailing Address: <u>684 Langhlin Rd</u>	Method of Lat/Long (check one): Conventional Survey _____
<u>Claveland Ms. 38732</u>	USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
City State Zip Code	_____ 1/4 _____ 1/4 Sec <u>4</u> T <u>21N</u> R <u>06W</u>
Telephone No. (<u>662</u>) <u>843-5842</u>	Distance Direction Nearest Town
	<u>2</u> Miles <u>W</u> of <u>Shen. Ms.</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet <input type="radio"/> <u>Submersible</u> <input checked="" type="radio"/>	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston <input type="radio"/> Turbine <input type="radio"/>	<u>Electric Motor</u> <input checked="" type="radio"/> Hand <input type="radio"/> Tractor PTO <input type="radio"/>
Centrifugal Rotary <input type="radio"/> Flowing Well <input type="radio"/>	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>40</u>
Date Pump Installed: <u>Sept. 5 10</u>	Setting Depth: <u>70</u> feet
Rated Pump Capacity: <u>1800</u> Gallons Per Minute	Number of Stages: <u>1</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: _____	Air Line Electric Measuring Line Steel Tape
Static Water Level (A): <u>43</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): _____ Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: _____ Feet Below Land Surface	Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping
Test Pumping Rate: _____ Gallons Per Minute	
Duration of Pump Test (minimum 4 hours): _____ hours	

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

Cook Drilling Co., Inc. 289
 Print Name of Pump Installer and License No. (if applicable)

Lidney Cook
 Signature of Pump Installer

Form OLWR-SWB-1B (4/09)
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