	State Well Report				
County: BOLIVAC	Part 1 – Driller's Log	For Office Use Only:			
Permit #: 6W-46747	Mississippi Department of Environmental Qualit	ty Aquifer:			
	Office of Land and Water Resources P.O. Box 2309	Well #: R227			
Driller: J. NEWCOME 0:773	Jackson, MS 39225	L. S. Elevation:			
Date drilling completed: 1.24.13	(601)961- 5210 (601)961- 5228 (fax)	L. S. Elevation:			
	(001)901- 3226 (lax)	E-log #:			
	t be prepared by the license holder responsible j				
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) Well or Borehole Location					
Owner Name Delta Pine Land	1 Co. LP Latitude: <u>33 ° 35 </u> ,5	57" Longitude: 1 . 00, 55"			
Mailing Address: P.O. Box 5	Method of Lat/Long (circl	le one): Conventional Survey,			
	USGS quad, Hand-l	held GPS Survey-grade GPS			
7	NW 1/4 NW /4 Sec	10 Twn 200 Rng 08 W			
City State	2 30/04 NE				
City State	Zip Code Distance Direction	on Nearest Town			
Telephone No. ()					
	Well / Borehole Data				
Date drilling started: 1.24.13 Date drilling completed: 1.24.13 Hole depth: 107 Hole diameter: 24					
Location of the source of any surface water used for drilling: SLOUGH. Method of dosing and volume of Chlorine used in drilling and development: CHLORENE TABLETS					
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) Replaces 10218					
If drilling is not related t	Seismic Survey Other (describe) REPTALES TO X18 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 X Fish Culture Other:					
If a flowing well, method of flow regulation: Valve Other (describe)					
Static Water Level:feet above or below (circle one) land surface					
Method of Measurement (circle one) steel tape electric tape air line other:					
Well depth: 105 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonits Mix					
Casing length: 65 feet Casing diameter: 16 inches Type of casing: P.V.C.					
Screen length: 40 feet Screen diameter: 16 inches Type of screen: P.V.C.					
Screen slot size:					
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-PREVED

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Wells and boreholes, unless specifically exempted by regulation Ground Level Description of Formations Encountered From (depth) To (de	7	en de la companya de	
Ground Level Description of Formations Encountered From (depth) To (de TOP SOLL Ground Level 10 CAY 10 25 SANO 1 25		Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations	
TOP SOLL Ground Level 10 CURY 10 2: SAND, 25 53		Description of Formations Encountered From (depth) To (depth	h)
(5) LF (MR) (MRSE SAM) 25 55 76 MR) (MR) (MRSE SAM) 75 76 MR) (MR) (MR) (MR) (MR) (MR) (MR) (MR)	A	Top Soll Ground Level 10	
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16" CASING BOTTOM 105 10	11 000 000		_
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	11 401=		
	11 700		_

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

aid in locating the aid a north arrow.	e well; 3) any roads, power lines, or other items that may aid in locating the property a	nd the well;
	SEE MAS!	
.andowner Name:		

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee

STATE WELL REPORT

Part 2

County: Bolivar

Permit #: GW-46747

Driller: J. Neucome 0.773

Date completed: 2-26-13

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)

For Office Use Only:				
Aquifer:				
Well#: Raa7				
Elevation:				

This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump.			
Well Owner Information	Well Location		
Owner Name Delta Pine Land CO. LP	Latitude: 33.035.57 Longitude: 91.00-55		
Mailing Address: P.O. Box 5669	Method of Lat/Long (circle one): Conventional Survey.		
<u> </u>	USGS quad, Hand-held GPS. Survey-grade GPS		
City State Zip Code	NE 1/2 NW 1/4 Sec 10 Twn 20N Rng 08W		
Tal. 1. See .	Distance Direction Nearest Town		
Telephone No. ()	5 Miles NE of Scoll		
Down You			
Pump Type Circle one	Power Type Circle one		
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas		
Bucket Piston Turbine	Electric Motor Hand Tractor PTO		
Centrifugal Rotary Flowing Well	Windmill Other (specify):		
Other (specify):	Horse Power Rating of Motor: 60hp		
Date Pump Installed: 2-26-13	Setting Depth: 7 O feet		
Rated Pump Capacity: 2400 Gallons Per Minute	Number of Stages:		
Pump Test Data	Method of Measuring Water Level		
Date Well Tested:	Circle one		
Static Water Level (A):Feet Below Land Surface	Air Line Electric Measuring Line Steel Tape		
Pumping Walfalevel (B): Feet Pelow Land Surface	Other (specify):		
Drawdown (B) -(A)]:Feet Below Land Surface	For flowing well, measured shut in head:		
Test Pumping Rate: Gallons Per Minute	Well yielded GPM with a drawdown of		
Duration of Pump Test (minimum 4 hours):hours	feet afterhours of pumping		
I HEREBY GERTIFY that the above statements are true to the best of my knowledge. Stephens Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer			

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BY: OLWR