County: CHOCTAW

Permit #:

Driller: RANDY SALERS

Date drilling completed: 12-3-06

State Well Report

Part 1 – Driller's Log

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 #: D-107

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: MISSISSIPPI LIGNITE MINING CO.

Mailing Address: 1000 McENTIRE RD
ACKERMAN MS 39735

City State Zip Code

Telephone No. (662) 387-5200

Well or Borehole Location

Latitude: 33 ° 23 ' 21 " Longitude: 89° 14 ' 40 "

Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS

SW ¼ SW ¼ Sec 27 Twn 18N Rng 10E

Distance 2.5 Miles Direction NW of Nearest Town Chester

Well / Borehole Data

Date drilling started: 9-22-06 Date drilling completed: 12-3-06 Hole depth: 185 Hole diameter: 10"

Location of the source of any surface water used for drilling: LITTLE BYNY CREEK
Method of dosing and volume of Chlorine used in drilling and development: 1 GAL BLEACH TO 500 GAL WATER

Logs run (circle all applicable): No log run (Electric) (Gamma Ray) (Density) Sonic Neutron Other:
Name of organization running log(s): CENTURY GEOPHYSICAL CORP

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: 131 feet above or (below) (circle one) land surface Date measured: 12-13-06

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

Well depth: 185 Well grouted to a depth of 135 feet Type of grout (circle one): (Neat Cement) Bentonite Mix

Casing length: 150 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 35 feet Screen diameter: 4 inches Type of screen: PVC

Screen slot size: 0.010 inches Setting depth: From 145 feet to 180 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

D-107

The sketch below only required for water wells

If well telescopes, show depths on sketch.

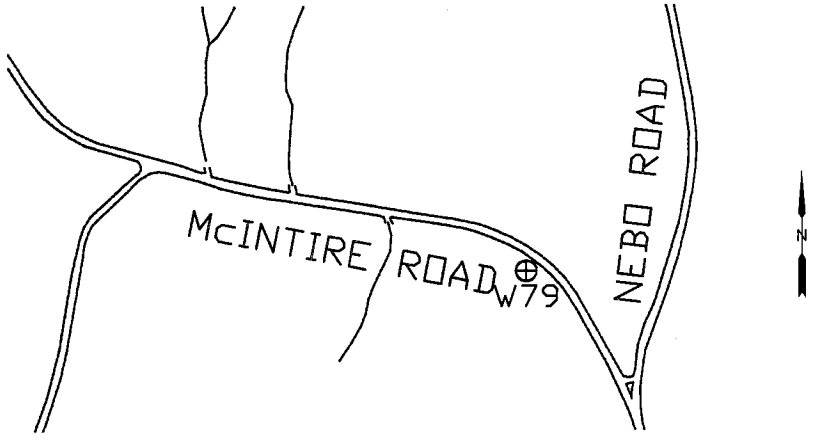
Ground Level

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

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)
SAND	Ground Level	38
LIGNITE	38	40
CLAY	40	47
SAND	47	54
CLAY	54	58
LIGNITE	58	61
CLAY	61	81
LIGNITE	81	84
CLAY	84	106
SAND	106	118
LIGNITE	118	121
CLAY	121	140
LIGNITE	140	145
SAND	145	165
LIGNITE	165	167
SAND	167	176

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: MS Lignite Mining Co.

Form: OLWR-SWR-1A

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.

Randy SAIERS MS LIC 0079 GM 4-4-07 Randy Saiers

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 10631
Jackson, MS 39289-0631
(601)961-5210
(601)354-6938 (fax)

County: CHOCTAW
Permit #:
Driller: RANDY SALERS
Date completed: 12-3-06
Copy information from block on Part 1

For Office Use Only:
Aquifer:
Well #: D-107
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: MISSISSIPPI LIGNITE MINING CO
Mailing Address: 1000 McINTIRE RD
ACKERMAN MS 39735
City State Zip Code
Telephone No. (662) 387-5200

Well Location

Latitude: 33°23'21" Longitude: 89°14'40"
Method of Lat/Long (check one): Conventional Survey___, USGS quad___, Hand-held GPS___, Survey-grade GPS ✓
SW ¼ SW ¼ Sec 27 T 18N R 10E
Distance Direction Nearest Town
2.5 Miles NW of Chester

Pump Type
Circle one

Air Lift, Jet, (Submersible), Bucket, Piston, Turbine, Centrifugal, Rotary, Flowing Well
Other (specify):
Date Pump Installed: 12-16-2006
Rated Pump Capacity: 7.5 Gallons Per Minute

Power Type
Circle one

Diesel Engine, Gasoline Engine, Natural Gas, (Electric Motor), Hand, Tractor PTO, Windmill, Other (specify):
Horse Power Rating of Motor: 1/2
Setting Depth: 143 feet
Number of Stages:

Pump Test Data

Date Well Tested: 12-17-2006
Static Water Level (A): 131 Feet Below Land Surface
Pumping Water Level (B): 140 Feet Below Land Surface
Drawdown [(B) – (A)]: 9 Feet Below Land Surface
Test Pumping Rate: 3 Gallons Per Minute
Duration of Pump Test (minimum 4 hours): 4 hours

Method of Measuring Water Level
Circle one

Air Line, (Electric Measuring Line), Steel Tape
Other (specify):
For flowing well, measured shut in head: ___ feet
Well yielded 3 GPM with a drawdown of 9 feet after 4 hours of pumping

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

RANDY SALERS MS LIC 0079 GM
Print Name of Pump Installer and License No. (if applicable)

Randy Salers
Signature of Pump Installer

Form: OLWR-SWR-1B

RECEIVED
APR 09 2007
BY: OLWR