State We	ell Report For Office Use Only:	
County: CHOCTAW Part 1 – D	riller's Log	
Mississippi Department	of Environmental Quality Aquifer: D - 154	
	ox 10631	
Driller: RANDY SALERS P.O. B Jackson, M	S 39289-0631 L. S. Elevation:	
Date drilling completed: 4-26-01 (601)9	961-5210 4-6938 (fax) E-log#:	
(001)33	(444)	
State Law requires that this report be prepared by the lice Department at the above address within 30 days of comp	ense holder responsible for the work and filed with the letion of drilling of the well or borehole.	
Information on Well Owner	Well or Borehole Location	
(Landowner if borehole is not for a water well)	Latitude: 33 ° 22 ', 42" Longitude: 89 ° 15 ', 37 "	
Owner Name 1915 Lignife Mining Co.		
Mailing Address: 1000 Manthre Rd	Method of Lat/Long (circle one): Conventional Survey,	
	USGS quad, Hand-held GPS, Survey-grade GPS	
Ackernan, MS 39735	NW1/4 SW 1/4 Sec 33 Twn 18 N Rng 10E	
City State Zip Code	Distance Direction Nearest Town 2.5 Miles NW of CHESTER	
Telephone No. (1012) 387-5200	VI JAMES TO THE STATE OF THE ST	
	ehole Data	
Date drilling started: 3-3-01 Date drilling completed: 4-26	-07 Hole depth: 205 Hole diameter: 43/4	
Location of the source of any surface water used for drilling: LITTLE BYWY CREEK Method of dosing and volume of Chlorine used in drilling and development: 1 GAL BLEACH TO 500 CHAL WATER		
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s): ENTURY GEOPHYSICAL (ORD		
Purpose of borehole (check one): Water Well X Geotechnical/Geo	ological Investigation Ground Source Heat Pump	
Seismic Survey Other (described to water well construct	be)ion, skip the remainder of this block	
Purpose of Well (check one): Home Industrial Public Supp		
If a flowing well, method of flow regulation: Valve		
Static Water Level: 130.6 feet above of below (circle one) land surface Date measured: 5-15-07		
Method of Measurement (circle one) steel tape electric tape air line other:		
Well depth: 205 Well grouted to a depth of 155 feet Type of grout (circle one): Neat Cement) Bentonite Mix		
Casing length: 168 feet Casing diameter: 4 inches Type of casing: PVC Screen length: 40 feet Screen diameter: 4 inches Type of screen: PVC		
. 2		
Screen slot size: O.O.\ inches Setting depth: From \(\lambda \text{0} \) feet to \(\frac{200}{200} \) 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. I		
	Form: OLWR-SWR-1/	

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If well telescopes,	show depths on sketch.
Ground Level	

Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered		lo (depth)
	Ground Level	.7
L'enite		19
Llay	19	105
l Lavida	105	108
Lignite Elex	108	155
1 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	185	160
high ife	160	184
	184	186
Lynite Soud	186	200
- Jana		
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		-
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		+

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

Sketch the property layout and include the following aid in locating the well; 3) any roads 4) a north arrow.	ing: 1) the well location; 2) any permanent structures on the property s, power lines, or other items that may aid in locating the property	writy that may and the well;
Landowner Name: MS Lignie Mi	ining Co.	
		Form: OLWR-SWR-1

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. KANGY SAIESS M5 Lic 0779 GM 6-21-07

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee

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STATE WELL REPORT

County: CHOCTAW Permit #: Driller: RAND Date completed:

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

Copy information from block on Part 1	(601)334	-6938 (IaX)	<u>L</u>		
This part of the report must be completed by a report must be attached and both parts filed w	licensed water well co with the Department at	ontractor or a lice the above address	nsed pump inst within 30 days	tuller. A copy o s of well comple	f Part 1 of the ction.
Well Owner Information			Well I	ocation	
Owner Name: M & Lignite Mini	ng (o.	Latitude: 33°2	2'42" I	ongitude: <u>89</u>	°15' 37"
Mailing Address: 1000 M. Zahire		Method of Lat/Lo	ong (check one)	: Conventional	Survey,
Ackerman, ms	39735	USGS quad	, Hand-held G	PS, Survey	-grade GPS_X
City State	Zip Code	NW 1/4 SW	_¼ Sec_ <u>33</u>	<u>t 18n</u> r	10E
City State	Zip Code	Distance	Direction	Nearest Tow	п
Telephone No. (462) 387-5200	-	2.5 Miles	NW of	CHESTI	ER
			r	T	
Pump Type Circle one		_		er Type cle one	
Air Lift Jet S	ubmersible	Diesel Engine	Gasoline	Engine	Natural Gas
Bucket Piston T	urbine	Electric Motor	Hand		Tractor PTO
Centrifugal Rotary F	lowing Well	Windmill		pecify):	1
Other (specify):		Horse Power Ra	ting of Motor:	0.5	
Date Pump Installed: 5-25-07		Setting Depth: _	190		feet
Rated Pump Capacity: 7.5 G	allons Per Minute	Number of Stag	es:		
Pump Test Data		N		suring Water l	Level
Date Well Tested: 5-25-07			Cn	rele one	
Static Water Level (A): 130 . 6 Feet Be		Air Line	Electric Meas	suring Line	Steel Tape
Pumping Water Level (B): 190 Feet Be		Other (specify):	:		
1 .		F G =:	11	ut in boods	faat
Drawdown [(B) – (A)]: 59.4 Feet Below Land Surface		For flowing well, measured shut in head:feet Well yielded GPM with a drawdown of			
Test Pumping Rate:G		· ·	_		
Duration of Pump Test (minimum 4 hours): _	hours	57.4	feet after	<u> </u>	ours of pumping

Diration of Pump Test (minimum 4 nours):nours	
LINDEDAY CERTIFIES do t the above statements are true to the heat	of my knowledge
I HEREBY CERTIFY that the above statements are true to the best of	of my knowledge. Salein
RANDY SALEYS MSLIC 0779 GM	
Print Name of Purus Installer and License No. (if applicable)	Signature of Pump Installer

Form: OLWRSWEEVED

JUN 27 2007

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