County: Coahoma

Permit #: GW 40305

Driller: Delta Drilling of Tunica

Date drilling completed: 5-15-05

State Well Report

Part 1

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 #: C-118

L. S. Elevation: _____

E-log #: _____

State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.

Well Owner Information

Owner Name: Coleman Allen

Mailing Address: _____

Lyon MS
City State Zip Code

Telephone No. (____) _____

Well Location

Latitude N34 • 23 • 518 Longitude 090 • 29 • 544

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

NW ¼ NE ¼ Sec. 15 Twn 29N Rng 3W

Distance 5 Miles Direction NW 15 Nearest Town S of LULA MS

Well Data

Purpose of Well (circle one) Home Industrial Public Supply (Irrigation) Fish Culture Other: _____

Date well drilling started: 5-15-05 Date well drilling completed: 5-15-05

If flowing, method of flow regulation: Valve _____ Other (describe) _____

Static Water Level: 20 feet above or (below) (circle one) land surface Date measured: 5-16-05

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

Hole depth: 130 Well depth: 129 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement (Bentonite) Mix

Casing length: 90 feet Casing diameter: 12 inches Type of casing: PVC

Screen length: 40 feet Screen diameter: 12 inches Type of screen: PVC SLOTTED

Screen slot size: 50 inches Setting depth: From 90 feet to 130 feet

Type of completion (circle all applicable): (Gravel packed) Undereamed 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 back of page

Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: VISUAL

Name of organization running log(s): _____

I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

ALAN PYLE 0674
Print Name of Water Well Contractor and License No.

Signature of Water Well Contractor

well 1

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JUN 13 2005
BY: OLWR

C-118

If well telescoped please sketch below and show depths.

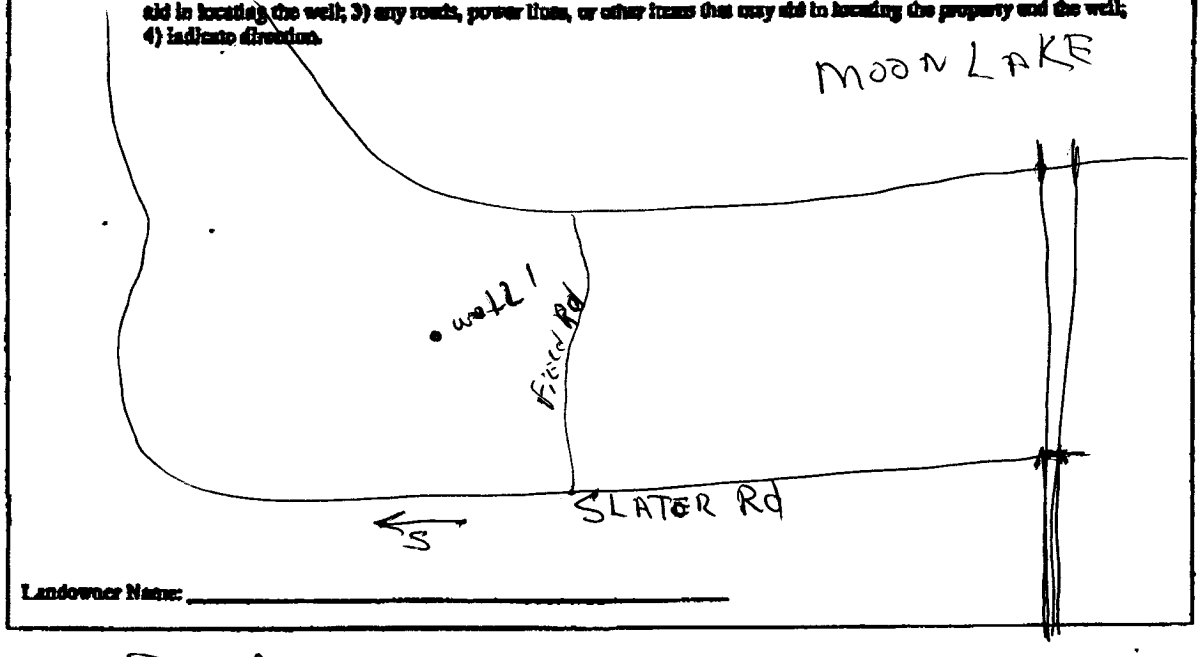
Ground Level

GW 40305

Description of Formations Encountered	From	To
Clay + Clay	0	40
Very fine Sand	40	70
Grey Clay	70	85
COURSE SAND	85	110
COURSE SAND GRAVEL	110	130

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

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) indicate direction.



Landowner Name: _____

Signature of Water Well Contractor

RECEIVED
JUN 13 2005
BY: OLWR

STATE WELL REPORT
Part 2
Pump Installer's Completion Report

County: Coahoma
Permit #: GW 40305
Driller:
Date completed: 6/17/05

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 #: C-118
Elevation:

This report must be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump. A copy of Part 1 of this report must be attached to this report.

Well Owner Information

Owner Name: Coleman Allen
Mailing Address: P.O. Box 324
Lyon (City) MS (State) 38645 (Zip Code)
Telephone No. ( )

Well Location

Latitude: Longitude:
Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
NE ¼ NW ¼ Sec 15 Twn 29N Rng 03W
Distance: 3 Miles Direction: South of Nearest Town: Lula

Pump Type
Circle one

Air Lift | Jet | Submersible
Bucket | Piston | (Turbine)
Centrifugal | Rotary | Flowing Well
Other (specify):
Date Pump Installed: 6-17-05
Rated Pump Capacity: 900 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: 70
Setting Depth: 60 feet
Number of Stages: two

Pump Test Data

Date Well Tested:
Static Water Level (A): 18 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 | (Steel Tape)
Other (specify):
For flowing well, measured shut in head: feet
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.

DAVID P. HOLT 0-752P
Print Name of Pump Installer and License No. (if applicable)

Signature of Pump Installer

RECEIVED
BY

County: [illegible]
Permit #: MSGW-40305
Driller: Delta Drilling of Tunica
Date drilling completed: 5-5-05

State Well Report
Part 1

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 #:
L. S. Elevation:
E-log #:

State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.

Well Owner Information

Owner Name: Coleman Allen
Mailing Address: POBox 327
Lyon MS
City State Zip Code
Telephone No. ( )

Well Location

Latitude N 34° 23' 51" Longitude 90° 29' 54"
Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
NE ¼ NE ¼ Sec 16 Twp 29 Rng 3W
NW NE
Distance Direction Nearest Town
5 Miles S of Lula MS

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YMD JOINT WATER MANAGEMENT DISTRICT

Well Data

Purpose of Well (circle one) Home Industrial Public Supply (Irrigation) Fish Culture Other:
Date well drilling started: 5-5-05 Date well drilling completed: 5-5-05
If flowing, method of flow regulation: Valve Other (describe)
Static Water Level: 20 feet above (or below) (circle one) land surface Date measured: 5-16-05
Method of Measurement (circle one): steel tape electric tape air line other:
Hole depth: 130 Well depth: 129 Well grouted to a depth of 10 feet
Type of grout (circle one): Cement (Bentonite) Mix
Casing length: 90 feet Casing diameter: 12 inches Type of casing: PVC
Screen length: 45 feet Screen diameter: 12 inches Type of screen: PVC SLOTTED
Screen slot size: 50 inches Setting depth: From 90 feet to 130 feet
Type of completion (circle all applicable): (Gravel packed) Undereamed 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 back of page
Logs run (circle all applicable): Yes log run Electric Gamma Ray Density Sonic Neutron Other: VISUAL
Name of organization running log(s):

I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

ALAN PYLE 0674
Print Name of Water Well Contractor and License No.

Signature of Water Well Contractor

well 1

40305