Well Owner Information Well Owner Information Owner Name Charles Antici Farms Mailing Address: 203 Porter Dr. Latitude: 34 ° 22 : 38 ° Longitude: 90 ° 29 ° 12 ° Method of Lat/Long (circle one): Conventional Survey, USOS quad, Hand-beld GPS, Survey-grade GPS ClarKsdale MIS. 38614 City State Zip Code Method of Lat/Long (circle one): Conventional Survey, USOS quad, Hand-beld GPS, Survey-grade GPS ME '4 NE '4 Sec 22 Twn 29W Rng 3W Distance Well Data Purpose of Well (circle one) Home Industrial Public Supply Infigation Fish Culture Other: Other (describe) Date well drilling started: 6 ~ 29 ~ 07 Date well drilling started: 6 ~ 30 ~ 07 Method of Mew regulation: Valve Other (describe) Static Water Level: 24 feet above of below(kirole one) land surface Date measured: 6 ~ 30 ~ 07 Method of Mew regulation: Valve Other (describe) Static Wate	State Well Report County: Coahoma Part 1 Permit #: Irrigation Equipment Mississippi Department of Environmental Office of Land and Water Resources Driller: Driller: 6-29-07 Date drilling completed: 6-29-07 State Law requires that this report be prepared by the driller in detail and 30 days of completion of drilling of the well	Well #: <u>C.136</u> L. S. Elevation: E-log #:	
Weil Decision Weil Decision Weil Decision Mailing Address: 20.3 Porter Dr. Mathematication of the porter Dr. Well Data Purpose of Well (circle one) Home Industrial Public Supply (Irrigation of Law (Long (circle one)): Date well drilling started: $6-29-07$ Method of Measurement (circle one) tool tage Well Date Method of Measurement (circle one) tool tage Method of Measurement (circle one) tool tage Method of Measurement (circle one): tool tage <td col<="" td=""><td>The second standing of the well.</td><td></td></td>	<td>The second standing of the well.</td> <td></td>	The second standing of the well.	
Mailing Address: $2US$ Porter Dr. Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS $NE \ \ \ NE \ \ \ \ \ \ \ \ \ \ \ \ \ \ $		Well Location	
Mailing Address: $2US$ Porter Dr. Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS $NE \ \ \ NE \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	Wher Name Charles Antici Farms Latitude: 34 . 23	2.38 " Longitude: 90 . 29 . (2 "	
$\frac{C[arksdalc Mls. 38614}{City State ZipCode}$ $\frac{NE \lor NE \lor Sec 22 Twn 29N Rng 3W}{Mles State ZipCode}$ $\frac{NE \lor NE \lor Sec 22 Twn 29N Rng 3W}{Well Data}$ $\frac{NE \lor NE \lor Sec 22 Twn 29N Rng 3W}{Well Data}$ $\frac{Mles Mles Mles State Towp}{Well Data}$ $\frac{Mles Mles Mles Mles State Towp}{Well Data}$ $\frac{Well Data}{Well Data}$ $\frac{Well Data}{Well drilling started: 6-29-09} Date well drilling completed: 6-29-09}{Date well drilling started: 6-29-09} Date well drilling completed: 6-30-09}{Method of flow regulation: ValveOther (describe)}$ $Mles Mles Vell (circle one) Home Industrial Public Supply (Inrigation) Fish Culture Other:Other (describe)Other ($	Mailing Addresses /// C U.S. No. /)		
$\frac{C[arksdalc Mls. 38614}{City State ZipCode}$ $\frac{NE \lor NE \lor Sec 22 Twn 29N Rng 3W}{Mles State ZipCode}$ $\frac{NE \lor NE \lor Sec 22 Twn 29N Rng 3W}{Well Data}$ $\frac{NE \lor NE \lor Sec 22 Twn 29N Rng 3W}{Well Data}$ $\frac{Mles Mles Mles State Towp}{Well Data}$ $\frac{Mles Mles Mles Mles State Towp}{Well Data}$ $\frac{Well Data}{Well Data}$ $\frac{Well Data}{Well drilling started: 6-29-09} Date well drilling completed: 6-29-09}{Date well drilling started: 6-29-09} Date well drilling completed: 6-30-09}{Method of flow regulation: ValveOther (describe)}$ $Mles Mles Vell (circle one) Home Industrial Public Supply (Inrigation) Fish Culture Other:Other (describe)Other ($	USGS quad, H	and-held GPS, Survey-grade GPS	
City State Zip Code Telephone No. (
Telephone No. (- <u>1417350016 1113: 58814</u>		
Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other:	City State Zip Code Distance Dir Telephone No. ()	rection Nearest Town VW of <u>TONESTRUM</u>	
Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other:	Wall Data		
Date well drilling started: <u>6-29-09</u> Date well drilling completed: <u>6-29-09</u> If flowing, method of flow regulation: Valve <u>Other (describe)</u> Static Water Level: <u>24</u> feet above dr below direle one) land surface Date measured: <u>6-30-09</u> Method of Measurement (circle one) steel tape electric tape air line other: <u>6-30-09</u> Hole depth: <u>125</u> Well depth: <u>125</u> Well grouted to a depth of <u>10</u> feet Type of grout (circle one): Cement Bentonite Mix Casing length: <u>85</u> feet Casing diameter: <u>10</u> inches Type of casing: <u>PVC</u> Screen slot size: <u>050</u> inches Setting depth: From <u>86</u> feet to <u>125</u> feet Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe): <u>Top of lap pipe or reduction in casing</u> : <u>feet. If telescoped or more than one screen, describe on back of page</u> Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: <u>Name of organization running log(s)</u> : I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Equipment Inc. John P. Chism 0439			
If flowing, method of flow regulation: ValveOther (describe)	Fish Cu	ilture Other:	
If flowing, method of flow regulation: ValveOther (describe)	Date well drilling started: 6-29-09 Date well drilling completed: 6-29-09		
Static Water Level: 24 feet above the below deircle one) land surface Date measured: 6-30-07 Method of Measurement (circle one) steel tape electric tape air line other:	If flowing, method of flow regulation: Valve		
Method of Measurement (circle one) teel tape electric tape air line other:	Static Water Level: 24 feet above & below (eircle one) land surface Date measured: 6-30-09		
Hole depth: 125 Well depth: 125 Well grouted to a depth of 10 feet Type of grout (circle one): Cement Bentonite Mix Casing length: 85 feet Casing diameter: 10 inches Type of casing: PVC Screen length: 40 feet Screen diameter: 10 inches Type of screen: PVC Screen slot size: . 05D inches Setting depth: From 86 feet to 125 feet Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe):			
Type of grout (circle one): Cement Bentonite Mix Casing length: <u>85</u> feet Casing diameter: <u>10</u> inches Type of casing: <u>PVC</u> Screen length: <u>40</u> feet Screen diameter: <u>10</u> inches Type of screen: <u>PVC</u> Screen slot size: <u>050</u> inches Setting depth: From <u>86</u> feet to <u>125</u> feet Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe):			
Casing length: <u>85</u> feet Casing diameter: <u>10</u> inches Type of casing: <u>PVC</u> Screen length: <u>40</u> feet Screen diameter: <u>10</u> inches Type of screen: <u>PVC</u> Screen slot size: <u>050</u> inches Setting depth: From <u>86</u> feet to <u>125</u> feet Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe):			
Screen length: 40 feet Screen diameter: 10 inches Type of screen: PVC Screen slot size: 0.50 inches Setting depth: From 86 feet to 12.5 feet Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe):			
Screen slot size: <u>050</u> inches Setting depth: From <u>86</u> feet to <u>125</u> feet Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe):			
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe):			
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: 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. I rrigation Equipment Inc. John P. Chism 0439			
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Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws. Irrigation Equipment Inc. John P. Chism 0439	Name of organization running log(s):		
Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws. Irrigation Equipment Inc. John P. Chism 0439	I ceruly that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi		
John P. Chism 0439	Department of Environmental Quality and/or the Mississippi Department of Health reg	gulations and state laws.	
	illigation Equipment Inc.	-0	
Print Name of Water Well Contractor and License No.		<u>cl</u>	
	Print Name of Water Well Contractor and License No.	ature of Water Well Contractor	

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If well telescopes please sketch below and show depths.

Ground Level

Description of Formations Encountered	From	То
Clay	0	28
Fine Sand + Gravel Medium Sand + Gravel	29	49
Fine Sand + Gravel	50	71
Medium Sand + Gravel	72	125
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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.

ka Metro a

Landowner Name: Charles Antici Farms

Signature of Water Well Contractor

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STATE W	ELL REPORT	
County: County: County: Pump Installer Permit #: Irrigation Equipment Mississippi Department Irrigation Equipment Office of Land Date completed: 6 ~ 29 ~ 09 (60)	Part 2 For Office Use Only: e's Completion Report Aquifer: ent of Environmental Quality Aquifer: and Water Resources Well #: MS 39289-0631 Well #: 1)961-5210 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 Owner Name: <u>Charles Antic; Farme</u> Mailing Address: <u>203 Porter Dr.</u> <u>Clarksdulc Ms. 3861</u> 4 City State Zip Code Telephone No. ()	Well Location	
Pump Type Circle one	Power Type Circle one	
Air LiftJetSubmersibleBucketPistonTurbine	Diesel Engine Gasoline Engine Natural Gas	
Centrifugal Rotary Flowing Well	Electric Motor Hand Tractor PTO Windmill Other (specify):	
Other (specify): Date Pump Installed: $6 - 30 - 09$ Rated Pump Capacity: $750 \pm$ Gallons Per Minute	Horse Power Rating of Motor:	
Pump Test Data Date Well Tested:	Method of Measuring Water Level Circle one	
Static Water Level (A): Feet Below Land Surface Pumping Water Level (B): Feet Below Land Surface	Air Line Electric Measuring Line Steel Tape Other (specify):	
Drawdown [(B) – (A)]:Feet Below Land Surface	For flowing well, measured shut in head:feet	
Test Pumping Rate: Gallons Per Minute Duration of Pump Test (minimum 4 hours): hours	Well yieldedGPM with a drawdown offeet afterhours of pumping	
I HEREBY CERTIFY that the above statements are true to the best John P. Chism 0439 Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer	
	JUL 0 7 2009	

BY: OLWR

