State Well Report County: Coahoma Part 1 - Driller's Log For Office Use Only Permit #: GW-44087 Mississippi Department of Environmental Quality Aquifer: Office of Land and Water Resources					
Brenzis # 61,1-44097 Mississippi Department of Environmental Quality	, .				
Irrigation Equipment Office of Land and Water Resources Aquifer: Driller: P.O. Box 2309 Well #: 0118					
Jackson, MS 39225 Date drilling completed: 4-6-10 Jackson, MS 39225 (601)961-5210					
(601)961- 5228 (fax)					
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 and filed with the					
Information on Well One ways of completion of artiling of the well or borehole.					
(Landowner if borehole is not for a water well) Well or Borehole Location					
Owner Name Mike Swindoll Farms Latitude: 34 .00 .528" Longitude: 90 .30,					
Mailing Address: 5253 Will's Road Method of Lat/Long (circle one): Conventional Survey,					
USGS quad, Hand-held GPS Survey-grade GPS					
Tutwiler Ms. 38963 NE 1/ NE 1/2 Sec 28 Twn 25N Rng 3					
TutwilerMs.38963NE ½ NE ½ Sec 28 Twn 25N Rng 3CityStateZip CodeTelephone No.662-902-7141DistanceDirectionNearest TownSMilesEMilesSMilesMiles					
Well / Borehole Data					
Date drilling started: 4-6-10 Date drilling completed: 4-6-10 Hole depth: 127 Hole diameter: 18"					
Location of the source of any surface water wood for drive a company of the source of any surface water wood for drive					
Method of dosing and volume of Chlorine used in drilling and development: <u>50 PPM</u>					
Logs run (circle all applicable: No log run Electric Gamma Ray Density Sonic Neutron Other:					
Purpose of borehole (check one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump					
Seismic Survey Other (describe)					
If ariting 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: 39' feet above or below (circle one) land surface Date measured: 4-7-2010					
Method of Measurement (circle one) steel tape electric tape air line other:					
Well depth: <u>127</u> Well grouted to a depth of <u>10</u> feet Type of grout (circle one): Neat Cement Bentonite Mix					
Casing length: <u>87</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: PVC					
Screen slot size: .050 inches Setting depth: From 88 feet to 127 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					

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Form: OLWR-SWR-1A (04/08)

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The sketch below only required for water wells

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

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) a north arrow.

Landowner Name: Mike Swindoll Farms

Form: OLWR-SWR-1A (04/08)

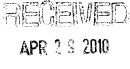
I certify that the well/borehole was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state laws.

Patrick M. Chism 0695

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee





	STATE W	FII DEDODT	_		
County: Coghoma	STATE WELL REPORT Part 2		For Office Use Only:		
Permit #: <u>GW-44087</u> Irrigation Equipment	Pump Installer's Completion Report Mississippi Department of Environmental Opality		Aquifer:		
	Office of Land and Water Resources P.O. Box 2309		Well#: 0118		
Date completed: 4-6-10	Jackson, MS 39225				
Corr information from block on Part 1	(601)961-5210 (601)961-5228 (fax)		Elevation:		
This part of the report must be completed by a line of					
report must be attached and both parts file Well Owner Informat	ed with the Department	l contractor or a licensed pump in at the above address within 30 d	staller. A copy of Part 1 of the		
		Well	Location		
Owner Name: Mike Swind	oll Farms	Latitude: 34 00' 53"N	Latitude: <u>34 °00' 53 "N</u> Longitude: <u>90° 50' 14 "</u> W		
Mailing Address: 5253 Will	ss: 5253 Willis Road		Method of Lat/Long (check one): Conventional Survey,		
		USGS quad, Hand-held GPS, Survey-grade GPS			
Tutwiler Ms. 38963 City State Zip Code		<u>NE % NE % Sec 28 T25N R 3W</u>			
		Distance Direction Rearest Town 			
	Telephone No. () Dist.		Roundaway		
Pump Type			/		
Circle one			er Type		
Air Lift Jet	Submersible	Diesel Engine Gasoline	rcle one Engine Natural Gas		
	Turbine	Electric Motor Hand	Tractor PTO		
Centrifugal Rotary	Flowing Well	Windmill Other (s	pecify):		
Other (specify):		Horse Power Rating of Motor:			
Date Pump Installed: 4-7-2010		OD.			
	pacity: 1150 ± Gallons Per Minute				
	Janons Per Minute	Number of Stages:			
Pump Test Data					
Date Well Tested:			uring Water Level		
Static Water Level (A): Feet B	elow Land Surface	Air Line Electric Measu			
Pumping Water Level (B):Feet Be		Other (specify):			
Drawdown [(B) - (A)]:Feet Bo		For flowing well, measured shut	in head: feet		
Test Pumping Rate:G	allons Per Minute				
Duration of Pump Test (minimum 4 hours):		Well yielded			
	hours	feet after	hours of pumping		
This is for (circle one): New Well	Replacement of Exis	ting Pump Repair of Exist			
			mg rump		
		-A			
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.					
Patrick M. Chism 0695					
Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer					
Form: OLWR-SWR-1C (07-00)					
			ncucivel		
			APR 2 3 2010		

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