

County: Copiah
 Owner: LARRY Easley
 Date drilling completed: 12-13-07

State Well Report
 Part I - 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 #: U-21
 L.S. Elevation: _____
 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: Kenny Saucée
 Mailing Address: _____
 City: _____ State: _____ Zip Code: _____
 Telephone No. 1: _____

Well or Borehole Location
 Latitude: 31.42 11 Longitude: 90.27 49
 Method of Lat/Long (circle one): Conventional Survey
 USGS quad, Hand-held GPS, Survey-grade GPS
 Twp: 35 N, Rng: 7E
 Distance: _____ Miles Direction: _____ of Nearest Town: _____

Well / Borehole Data
 Date drilling started: 12-10 Date drilling completed: 12-13 Hole depth: 405 Hole diameter: 7 7/8
 Location of the source of any surface water used for drilling: _____
 Method of casing and volume of Chlorine used in drilling and development: _____
 Logs run (circle all applicable): No log run, Electric, Gamma Ray, Density, Sonic, Neutron, Other: _____
 Name of organization running log(s): _____
 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: _____
 Flowing well, method of flow regulation: Valve, Other (describe): _____
 Static Water Level: 150 feet above or below (circle one) land surface Date measured: 12-15
 Method of Measurement (circle one): steel tape, electric tape, air line, other: _____
 Well depth: 375 feet well grouted to a depth of 10 feet Type of grout (circle one): Best Cement, Bentonite, Mix
 Casing length: 355 feet Casing diameter: 4 inches Type of casing: PVC
 Screen length: 20 feet Screen diameter: 4 inches Type of screen: PVC
 Screen slot size: 006 inches Setting depth: From 355 feet to 375 feet
 Use of completion (circle all applicable): Gravel packed, Underreamed, Telescoped, Open hole, Natural Development
 Other (describe): _____
 Top of tap pipe or reduction in casing: _____ feet *If telescoped or more than one screen, describe on next page*

Form: OLWR-SWR-1A

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)

For Office Use Only

Aquifer _____
Well # U-21
Elevation _____

County _____
Permit # _____
Installer LARRY EASLEY
Date completed 12-15

This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump.

<p style="text-align: center;">Well Owner Information</p> <p>Owner Name <u>Kenny Saucier</u></p> <p>Mailing Address _____</p> <p>City _____ State _____ Zip Code _____</p> <p>Telephone No. (____) _____</p>	<p style="text-align: center;">Well Location</p> <p>Latitude _____ Longitude _____</p> <p>Method of Lat/Long (circle one): Conventional Survey USGS quad, Hand-held GPS, Survey-grade _____</p> <p>Distance _____ Direction _____ Nearest Town _____</p> <p>_____ Miles _____ of _____</p>
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<p style="text-align: center;">Pump Type Circle one</p> <p>Jet _____ <u>Submersible</u> _____ Turbine _____ Flowing Well _____</p> <p>Other (specify) _____</p> <p>Date Pump Installed <u>12-15-07</u></p> <p>Rated Pump Capacity <u>12</u> Gallons Per Minute</p>	<p style="text-align: center;">Power Type Circle one</p> <p>Diesel Engine _____ Gasoline Engine _____ <u>Electric Motor</u> _____ Hand _____ Windmill _____ Other (specify) _____</p> <p>Horse Power Rating of Motor _____</p> <p>Setting Depth <u>200</u> feet</p> <p>Number of Stages: <u>12</u></p>
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<p style="text-align: center;">Pump Test Data</p> <p>Date Well Tested <u>12-15</u></p> <p>Static Water Level (A) <u>150</u> Feet Below Land Surface</p> <p>Pumping Water Level (B) <u>165</u> Feet Below Land Surface</p> <p>Drawdown ((B) - (A)) <u>15</u> Feet Below Land Surface</p> <p>Test Pumping Rate <u>12</u> Gallons Per Minute</p> <p>Duration of Pump Test (minimum 4 hours) <u>4</u> hours</p>	<p style="text-align: center;">Method of Measuring Water Level Circle one</p> <p>Air Line _____ <u>Electric Measuring Line</u> _____</p> <p>Other (specify): _____</p> <p>For flowing well, measured shut in head: _____</p> <p>Well yielded <u>12</u> GPM with a drawdown of _____ feet after <u>4</u> hours of pumping</p>
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I HEREBY CERTIFY that the above statements are true in the best of my knowledge.

LARRY EASLEY 510 _____
Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer