county: Desoto
Permit #:
Driller: Jones W. Mason
Date drilling completed: 10-13-07

#### State Well Report

Part 1 - Driller's Log

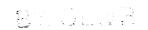
Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 10631
Jackson, MS 39289-0631
(601)961-5210
(601)354-6938 (fax)

For Office Use Only:
Aquifer:
Well #: <u>6-/06</u>
L. S. Elevation:
E-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	Well or Borehole Location			
(Landowner if borehole is not for a water well)	24 6 24 6 26 26 26 26 26 26 26 26 26 26 26 26 2			
	Latitude: 34 ° 54 '97] " Longitude: 89 ° 56 '383"			
Owner Name Grassland Issigation.	Method of Lat/Long (circle one): Conventional Survey,			
Mailing Address: Cherry tree subdivision	Method of Lat/Long (circle one): Conventional Survey,			
Mailing Address: CHETT THE 3090101360	USGS quad, Hand-held GPS, Survey-grade GPS			
corner of Cherry doie and Kenton				
•	Sw 1/4 NE 1/4 Sec 9 Twn JK Rng 7W			
Southouse Ms. City State Zip Code				
City State Zip Code	Distance Direction Nearest Town			
	3 Miles NW of pleasant hill			
Telephone No. (662) 429-7776				
Well / Bore	hole Dete			
Date drilling started: 10-13-07 Date drilling completed: 10-13-	87 Hole depth: $\frac{945'}{}$ Hole diameter: $\frac{6^3}{4}$			
Location of the source of any surface water used for drilling: NA				
Method of dosing and volume of Chlorine used in drilling and devel	opment: NV			
- Chieffod of dosing and votable of Chieffod asset in driving and devel	opinioni			
Logs run (circle all applicable): No log run Electric Gamma Ray Name of organization running log(s):	Density Sonic Neutron Other:			
Purpose of borehole (check one): Water Well  Geotechnical/Geole	aciaal Investigation Cround Source Heat Pump			
Purpose of borenoie (check one): water weil Geolechnical/Geole	ogical investigation Oround Source Heat Funip			
Seismic Survey Other (describe	)			
If drilling is not related to water well construction				
Purpose of Well (check one): Home Industrial Public Supply	Irrigation Fish Culture Other:			
If a flowing well, method of flow regulation: Valve O	ther (describe)			
Static Water Level: 193 feet above (r below) circle one) l	and surface Date measured: 10-14-07			
Method of Measurement (circle one) steel tape electric tape air line other: 54(ins line)				
Well depth: 345 Well grouted to a depth of 50 feet Type of grout (circle one): Neat Cement Bentonite Mix				
Casing length: 335 feet Casing diameter: 4 inches Type of casing: 0.00				
Screen length:				
Screen slot size: 010 inches Setting depth: From 235 feet to 245 feet				
Type of completion (circle all applicable): Gravel packed Under				
	<del>\</del>			
Top of lap pipe or reduction in casing:	lescoped or more than one screen, describe on next page			

Form: OLWR-SWR-1A



The sketch below only required for water well	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

Description of Formations Encountered	From (depth)	To (depth)
cley dist	Ground Level	35
growl Blue clay	35	75
Blue class	75	160
white sould	160	345
•		
		1
		<u> </u>

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

aid in locating the well; 3)	ne following: 1) the well location; 2) any permanent str any roads, power lines, or other items that may aid in l	ocating the property and the well;
4) a north arrow.	Y	
	1	
	Julia.	7
·	Kenton drue	
	3)0/0	
	To the second se	
	m	
Landowner Name: Grassland	Illigation	
L		Form: OLWR-SWR-1

Α

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.

Jones W. Mosen 0-630

Print Name of Responsible Licensee and License No.

### STATE WELL REPORT

# County: Descho Permit #: Driller: Joves

## Part 2

Pump Installer's Completion Report Mississippi Department of Environmental Quality
Office of Land and Water Resources P.O. Box 10631

For Office Use Only:
Aquifer:
Well #: <b>G-106</b>
Elevation:

Date completed: 10-14-07	•	1S 39289-0631 961-5210	Well #: <b>G</b> 186	
Copy information from block on Part 1	` ,	4-6938 (fax)	Elevation:	
This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part 1 of the report must be attached and both parts filed with the Department at the above address within 30 days of well completion.				
Well Owner Informat	ion	Well	Location	
Owner Name: Grossland Irriga	Hich.	Latitude: 34.54.971	Longitude: 89 · 56 · 383	
Mailing Address: Cherry tice so	bdivison	Method of Lat/Long (check on	,	
(where of cherry place	e and Kenton	USGS quad, Hand-held	GPS, Survey-grade GPS	
Sartherer MS. City State	38671 Zip Code	SW 1/NE 1/1 Sec 9		
Telephone No. ( <u>&amp;る)                                    </u>		Distance Direction  3 Miles Nul of	Nearest Town	
Pump Type Circle one			ver Type rcle one	
Air Lift Jet	Submersible	Diesel Engine Gasoline	e Engine Natural Gas	
Bucket Piston	Turbine	Electric Motor Hand	Tractor PTO	
Centrifugal Rotary	Flowing Well	Windmill Other (s	specify):	
Other (specify):		Horse Power Rating of Motor:	5 m.	
Date Pump Installed: (0-13-07	<del></del>	Setting Depth: 160	feet	
Rated Pump Capacity: 60	Gallons Per Minute	Number of Stages:	B	
Pump Test Data		Mothod of Moo	ausing Water Level	
· .			suring Water Level rele one	
Date Well Tested: 10-19-07	<del></del>	Air Line Electric Meas	uring Line Steel Tape	
Static Water Level (A): 7 3 Feet Below Land Surface		Other (specify): 5tring	lueight	
Pumping Water Level (B): NA Feet B	Below Land Surface	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		
Drawdown [(B) – (A)]:Feet l	Below Land Surface	For flowing well, measured shu	nt in head:feet	
Test Pumping Rate: 60	Gallons Per Minute	Well yielded 60	_GPM with a drawdown of	
Duration of Pump Test (minimum 4 hours):	∂੫hours	feet after	→ Hours of pumping	
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.				

I HEREBY CERTIFY that the above statements are true to the best of	of my knowledge.	
Jones W. Moson 0-670	Gersin, Mass.	*
Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer	

Form: OLWR-SWR-1B