County:       Description         Permit #.	<u></u>	<b>State W</b>	ell Report		
Permit #	County: Dests	Part 1 – I	Driller's Log		
Drifter:       Juste drilling completed:       \$F-H+10       P.O. Box 2309 Jackson, MS 39225 (601)961-5220 (ac)       Well #       L. S. Bevation				Aquifer: H Ddc	
Date drilling completed:       \$\frac{2}{14-10}       \$\frac{2}{0011961-5220}\$       \$\frac{1}{15061-5220}\$         State Law requires that this report be prepared by the fleenese 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.       \$\frac{1}{1506}\$       \$\frac{1}{1506}\$ </td <td></td> <td colspan="2">P.O. Box 2309</td> <td>Well #:</td>		P.O. Box 2309		Well #:	
Date dilling complete:       p=1/9710       (601)861-5228 (fax)       E.tog #         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 wolf or borchole.       Well or Bprchole Location       p         Department at the above address within 30 days of completion of drilling of the wolf or borchole.       Well or Bprchole Location       p         Mailing Address:				L. S. Elevation:	
State Law requires that this report be grepared 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 work and filed with the Landowner Uberhole is not for a water well)         Well or Bprehole Loastinn       \$\$ Vell or Bprehole Vell or Bprehole Loastinn       \$\$ Vell or Bprehole Vell or Bprehole Loastinn       \$\$ Vell or Bprehole Vell Or Bprehole Vell Diastinn       \$\$ Vell Vell or Bprehole Vell Diastinn       \$\$ Vell Vell Or Diastinn       \$\$ Vell Vell Or Diastin Vell Diastinn       \$\$ Vell Vell Vell Diast	Date drilling completed: $\frac{\delta' - 14 - 10}{10}$			E-log #·	
Department at the above address within 30 days of completion of dilling of the well or borchole.         Isformation on Well Owner (Landowner IJ berekole is not for a water well)         Owner Name Lynn       Adama         Mailing Address:       \$\$\frac{1}{250}\$         \$\$\frac{1}{250}\$       \$\$\frac{1}{50}\$         \$\$\frac{1}{250}\$       \$\$\frac{1}{50}\$         \$\$\frac{1}{250}\$       \$\$\frac{1}{50}\$         \$\$\$\frac{1}{150}\$       \$\$\frac{1}{50}\$         \$	State I aw requires that this repo	] rt he prepared by the lic	ense halder responsible for		
Landowner () Dorenote is not for a water weit)         Owner Name       Lywn       Adams.         Mailing Address:	Department at the above address	s within 30 days of comp	pletion of drilling of the well	l or borehole.	
Owner Name       Lytinde       Adams         Mailing Address:       [\$\$0 ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] ] [\$\$0 ] ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] ] [\$\$0 ] ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] [\$\$0 ] ] ] [\$\$0 ] ] [\$\$0 ] ] ] [\$\$0 ] ] ] [\$\$0 ] ] [\$\$0 ] ] ] [\$\$0 ] ] [\$\$0 ] ] [\$\$0 ] ] ] [\$\$0 ]		-	1	orehole Location	
Mailing Address: $L \ S \ D$ $\overline{Js} \ 1 \ over vert$ $E_{1} \ Lot \ a}$ $M_{1} \ S_{1} \ Colv$ $\overline{Js} \ Colv$ $E_{1} \ Civ$ $State$ $Zip \ Code$ $E_{1} \ Miles$ $Mel \ Method \ Sorvey \ S$			Latitude: $34 \circ 53$ , $34$	." Longitude: <u>89 • 4 4 , <b>7</b> 20</u> "	
Mailing Address: $[ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	Owner Name Lynn Hdons.		Method of Lat/Long (circle or	ne): Conventional Survey,	
$B_{11}$ <t< td=""><td>Mailing Address: 1850 Jaso</td><td>n meit</td><td colspan="3"></td></t<>	Mailing Address: 1850 Jaso	n meit			
Distance       Distance       Distance       Distance       Distance       Of       State       State         Telephone No.       CH					
Telephone No.       13/4       Miles       AE       of       Storecused!         Well / Borehole Data         Well / Borehole Data         Date drilling started:       §-14-10       Date drilling completed:       §-14-10       Hole depth:       150'       Hole diameter:       63/4         Location of the source of any surface water used for drilling:	Byholic M	38611	<u>SE % NW % Sec 20</u>	Twn JS Rng JW	
Telephone No. (~G)G	City Sta	te Zip Code			
Well / Borehole Data         Well / Borehole Data         Date drilling samtder & Colspan="2">Construction and summer & Colspan="2">Construction of the source of any surface water used for drilling:	Telephone No. (FUL) 463-052	6	1-5/4 Miles NE	of <u>stoneusell</u>	
Date drilling started:       §-14-10       Date drilling completed:       §-14-10       Hole depth:       1.50'       Hole diameter:       §-34         Location of the source of any surface water used for drilling:					
Location of the source of any surface water used for drilling:				< 24	
Method of dosing and volume of Chlorine used in drilling and development:   Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: Purpose of borehole (check one): Water WellGeotechnical/Geological InvestigationGround Source Heat Pump	Date drilling started: $8 - 14 - 10$ Date dr	illing completed: 8-14-1	0 Hole depth: 150	Hole diameter: <u>6314</u>	
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 WellGeotechnical/Geological InvestigationGround Source Heat Pump	Location of the source of any surface wate Method of dosing and volume of Chlorin	er used for drilling:/ e used in drilling and devel	opment: NH		
Purpose of borehole (check one): Water WellGeotechnical/Geological InvestigationGround Source Heat PumpSeismic SurveyOther (describe) // drilling is not related to water well construction, skip the remainder of this block Purpose of Well (check one): HomeIndustrial Public SupplyIrrigationFish CultureOther: f a flowing well, method of flow regulation: ValveOther (describe) f at flowing well, method of flow regulation: ValveOther (describe) Static Water Level:Gfeet above on Gelow (circle one) land surfaceDate measured:6_(4-(0)) Method of Measurement (circle one) steel tapeelectric tapeair linefrice Well depth: 150Well grouted to a depth of 1/feetinches	Logs run (circle all applicable): No log ru	D Electric Gamma Ray			
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:         f a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve         If a flowing well, method of flow regulation: Valve			agiaal Investigation Crown		
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:         f a flowing well, method of flow regulation: Valve A         Other (describe)         Static Water Level:       76' feet above or below (circle one) land surface Date measured:         6-14-0         Method of Measurement (circle one)       steel tape         electric tape       air line         other:       String (steel steel steel tape)         Well depth:       150         Well grouted to a depth of 10       feet         Type of grout (circle one): Neat Cemen Bentonite)       Mix         Casing length:       140         feet       Casing diameter:       4         inches       Type of screen:       put         screen slot size:       010       inches       Setting depth: From       140       feet         'ype of completion (circle all applicable):       Gravel packed       Underreamed       Telescoped       Open hole       Natural Development         Other (describe):        feet       If telescoped or more than one screen, describe on next page         'op of lap pipe or reduction in casing:        feet       If telescoped or more than one sc				Source Heat Fump	
Purpose of Well (check one): Home Industrial_Public Supply_Irrigation_Fish Culture_Other:	Seismic If drilling is not related	Survey <u>Other</u> Other ( <i>describe</i> )	)	ock	
Static Water Level:					
Method of Measurement (circle one) steel tape electric tape air line other: <u>Striws (weight</u> ) Well depth: <u>150</u> Well grouted to a depth of <u>10</u> feet Type of grout (circle one): Neat Cemen Bentonite Mix Casing length: <u>140</u> feet Casing diameter: <u>4</u> inches Type of casing: <u>put</u> Screen length: <u>10</u> feet Screen diameter: <u>4</u> inches Type of screen: <u>put</u> Screen slot size: <u>010</u> inches Setting depth: From <u>140</u> feet to <u>150</u> feet Screen slot size: <u>010</u> inches Setting depth: From <u>140</u> feet to <u>150</u> feet Screen slot size: <u>010</u> inches Setting depth: From <u>140</u> feet to <u>150</u> feet Screen slot size: <u>010</u> inches <u>Setting depth</u> : From <u>140</u> feet to <u>150</u> feet Screen slot size: <u>010</u> feet (describe): <u>A</u> Screen feet. <u>If telescoped or more than one screen, describe on next page</u> Screen Screen Screen in casing: <u>A</u> feet. <u>If telescoped or more than one screen, describe on next page</u> Screen Screen Screen Screen Screen <u>19</u> 2010	If a flowing well, method of flow regulatio	n: Valve ~~ O	ther (describe)		
Well depth: 150_Well grouted to a depth of 10_feet       Type of grout (circle one): Neat Cemen Bentonite Mix         Casing length: 140_feet       Casing diameter: 4	Static Water Level: <u>76</u> feet ab	ove or below (circle one) l	and surface Date measured:_	8-14-10	
Casing length: <u>140</u> feet Casing diameter: <u>4</u> inches Type of casing: <u>psc</u> Gereen length: <u>10</u> feet Screen diameter: <u>4</u> inches Type of screen: <u>psc</u> Gereen slot size: <u>010</u> inches Setting depth: From <u>140</u> feet to <u>150</u> feet Type of completion (circle all applicable): <u>Gravel packed</u> Underreamed Telescoped Open hole Natural Development Other (describe): <u>~A</u> Top of lap pipe or reduction in casing: <u>NA</u> feet. <u>If telescoped or more than one screen, describe on next page</u> Form: OLWR-SWR-1A (04/08) <u>Casing length</u> 2010	Method of Measurement (circle one) st	eel tape electric tape	air line other: <u>Str</u>	ing liveight	
Screen length: _/\feet Screen diameter:4inches Type of screen: Screen slot size:0(inches Setting depth: From140feet tofeet Type of completion (circle all applicable): 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 Form: OLWR-SWR-1A (04/08) PECENET 2010					
Screen slot size: <u>010</u> inches Setting depth: From <u>140</u> feet to <u>150</u> feet Type of completion (circle all applicable): <u>Gravel packed</u> Underreamed Telescoped Open hole Natural Development Other (describe): <u>A</u> Top of lap pipe or reduction in casing: <u>NA</u> feet. If telescoped or more than one screen, describe on next page Form: OLWR-SWR-1A (04/08) Form: OLWR-SWR-1A (04/08)					
Screen slot size: <u>010</u> inches Setting depth: From <u>140</u> feet to <u>150</u> feet Type of completion (circle all applicable): <u>Gravel packed</u> Underreamed Telescoped Open hole Natural Development Other (describe): <u>A</u> Top of lap pipe or reduction in casing: <u>NA</u> feet. If telescoped or more than one screen, describe on next page Form: OLWR-SWR-1A (04/08) Form: OLWR-SWR-1A (04/08)	Screen length: <u>/\</u> feet Scree	en diameter: <u>4</u>	inches Type of screen:	puc	
Other (describe): op of lap pipe or reduction in casing: feet. If telescoped or more than one screen, describe on next page Form: OLWR-SWR-1A (04/08) PECENEI 2210 2010				-	
Pop of lap pipe or reduction in casing: <u>A</u> feet. <u>If telescoped or more than one screen, describe on next page</u> Form: OLWR-SWR-1A (04/08) FORM: OLWR-SWR-1A (04/08)	Type of completion (circle all applicable):	Gravel packed Under	reamed Telescoped Open	hole Natural Development	
Form: OLWR-SWR-1A (04/08)		Other (describe):	vA		
RECEIVET	Top of lap pipe or reduction in casing:	heet. If teld	escoped or more than one scree	en, describe on next page	
EEP 1 0 2010					
SV: OMF				237 1 0 2010	
				BY: OMP	

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## 17 220

## The sketch below only required for water wells

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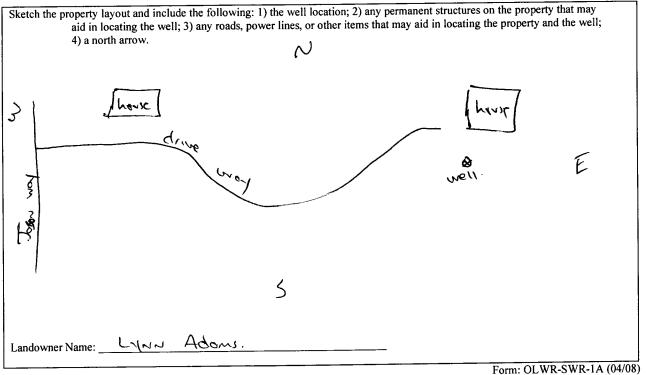
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Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

If well telescopes, show depths on sketch. Ground Level	Description of Formations Encountered	From (depth)	To (depth)
	- Clay dirt.	Ground Level	15
	red Sord	15	35
	quel	35	85
	white clay	85	110
	entite soud	110	150
			<u> </u>
			_ <del></del>
1			

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



BY: OMR

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.

forow. Man 9-7-10 0-620 Jones W. Mason Signature of Licensee Date Print Name of Responsible Licensee and License No. SEP 1 0 2010

	STATE WELL REPORT	
County: Desoto	Part 2 Pump Installer's Completion Report	For Office Use Only:
Permit #:	Mississippi Department of Environmental Quality Office of Land and Water Resources	Aquifer:
Driller: Jones w. Mason	P.O. Box 2309 Jackson, MS 39225	Well #:
Date completed: <u>8-14-10</u>	(601)961-5210 (601)961-5228 (fax)	Elevation:
Copy information from block on Part 1		the form of Part 1 of the

.

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 Information	Wen Docation
Owner Name: UNN Adoms.	Latitude: 34 · 53 · 205 Longitude: 89 · 44 · 170
Mailing Address: 1850 Joson Worf	Method of Lat/Long (check one): Conventional Survey,
	USGS quad, Hand-held GPS, Survey-grade GPS
Byhalia MJ. 38611	SE 1/ NW 1/4 Sec 28 T25 R 5W
City State Zip Code	Distance Direction Nearest Town
Telephone No. (901) 463-0526	13/1 Miles NE of Stonewoll

	Pump Type Circle one			Power Type Circle one	
Air Lift	Jet	Submersible	Diesel Engine	Gasoline Engine	Natural Gas
Bucket	Piston	Turbine	Electric Motor	Hand	Tractor PTO
Centrifugal	Rotary	Flowing Well	Windmill	Other (specify):	
Other (specify):		<u> </u>	Horse Power Rating	of Motor: 3/4	
Date Pump Installed:	8-14-10		Setting Depth:	00	_feet
Rated Pump Capacity:	10	Gallons Per Minute	Number of Stages: _	8	

Pump Test Data	Method of Measuring Water Level Circle one		
Date Well Tested: 8-14-10	Air Line Electric Measuring Line Steel Tape		
Static Water Level (A):Feet Below Land Surface	Other (specify): String ( seight		
Pumping Water Level (B):Feet Below Land Surface			
Drawdown [(B) – (A)]:Feet Below Land Surface	For flowing well, measured shut in head:feet		
Test Pumping Rate: Gallons Per Minute	Well yielded GPM with a drawdown of		
Duration of Pump Test (minimum 4 hours): 24 hours	$-\underline{\mu}$ feet after $\underline{\partial} \underline{\gamma}$ hours of pumping		

BY CERTIFY that the above statements are true to the best of my knowledge.	
window 0-620 frow. Man	
me of Pump Installer and License No. (if applicable) / Signature of Pump Installer Form: OLWR-SWR-18 to 1000	8008 p.n 245 - 1

SEP 1 8 2010

SV-OWR

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