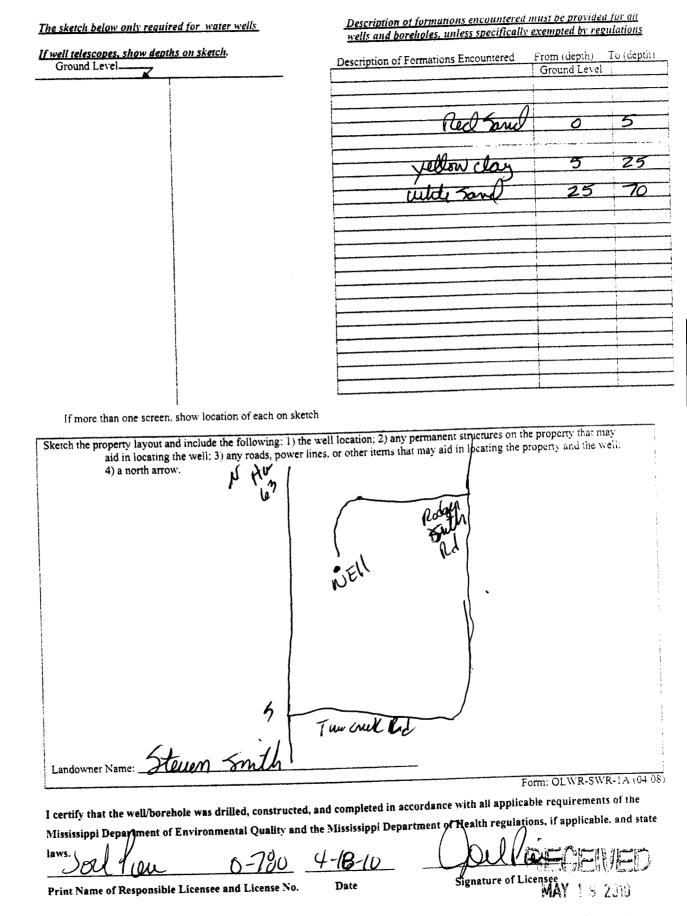
RE-Do

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	State W	ell Report	For Office Lse Only:				
County Deorge	Part 1 - Driller's Log		Agenton 6178				
Permit #: 0-780	Mississippi Department of Environmental Quality Office of Land and Water Resources						
Driller: Joel field	P.O. Box 2307		Well =:				
	Jackson, MS 39225 (601)961- 5210		L. S. Elevation:				
Date drilling completed <u>4-15-10</u>			E-icg =:				
State Law reautres that this report	he prepared by the lic	ense holder responsible for	the work and filed with the				
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							
Information on Well O (Landowner if borehole is not for							
Owner Name Steven Sm	th	Latitude: <u>30</u> 26 36	<u>1</u> Longitude <u>88 36 563</u> 34				
0.0	the Rol	Method of Lat Long (circle one): Conventional Survey.					
Mailing Address Kand-held OPS Survey-grade OPS							
	0.0110	SE NW Sec 1-	TVTwn 25 Rng GW				
Luchale m	0.15						
City State Zip Code Distance Direction Nearest Town Lines daly was							
Telephone No. ()							
	Well / Bor	ehole Data	*****				
Data delling and 4-15-10 Data de	lina normanate 4-15	-10 Hole depth 70	Hole diamates 2				
Date drilling started: <u>4-15-10</u> Date drilling completed: <u>4-15-10</u> Hole depth <u>70</u> Hole discussi <u>2</u> Location of the source of any surface water used for drilling: <u>Aguala, ws</u> Nothed of depine and volume of Chlorine used in drilling and development: <u>2000 Walte</u> <u>4gal</u> <u>chlorin</u>							
Method of dosing and volume of chlorine	uses in utiling and deve						
Logs run (circle all applicable). No log rur Name of organization running log(s).) Electric Gamma Raj	Dataity Stale Neumon	<u>Cinx</u>				
Purpose of borehole (check one): Water W			nd Source Heat Pump				
Selsmic S	orveyOther (describ	i	black				
If drilling is not related to water well construction, skip the remainder of this block							
Purpose of Well (check one): HomeIndustrial Public Supply Irrigation Fish Culture Other:							
(fa flowing well, method of flow regulation: Valve Other (describe)							
Static Water Level: 3 feet above or below (circle one) land surface Date measured: 4-15-10							
Method of Measurement (circle one) steel tape electric tape air line other:							
Well depth: 70 Well grouted to a depth of O feet Type of grout (circle one): Neat Cement Bentonite Mix							
Casing length: <u>60</u> feet Casing diameter: <u>2</u> inches Type of casing: <u>Sch 40 Planate</u>							
Casing length: O feet Casing diameter: 2 inches Type of casing: 200 400 400 400 400 400 400 400 400 400							
Screen slot size: /// inches	Setting depth: From						
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development							
Top of lap pipe or reduction in casing:	feet. If a	telescoped or more than one so	creen, describe on next page				
L			Form: OLWR-SWR-1A (04/0				
			- Martin com				

RECEIVED JUN 2 1 2010 BY: OLWR

5178



BV-OWP

Cours: Description Part 2 For Office Lise Ony: Permit *: Q - 740. Missingip Degramment of Environment Olaving Office of Land and Water Resources Audit: G. / 2.8 Date completed Q - 180. Discompleted System Weil *:		STATE WE	LL REPORT					
Permit = 0760 Pump Installer's Completion Report Differ of the report must be completed by a licensed network within 30 datas of well completion. Acader: G: 17.8 Differ 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 completed by a licensed water well contractor or a licensed pump installer. A copy of Part 1 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 parts filed with the Department of the above address within 30 datas of well completion. Port mate be acceled and both and Strate Well Over Information Owner Name: Statut Well Over Information Statut City Statut City Statut Statut Submersible Distance Distance Pump Type City City Statut Pump Type Distance Ci	Denel	Pa	rt 2	For Office Use Only:				
Driller: Jar D. P. Jau Office of Lind and Water Academies Disc completed: Q-18-10 Office of Lind and Water Academies Case: indomation from Nicek on Part 11 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 completed in a bove address within 34 days of well completion. Port Name: Well or 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 tracked and abor parts filed with the above address within 34 days of well completion. Well Ovaer Information Well Ovaer Information Owner Name: State Degramment a the above address within 34 days of well completion. Well Ovaer Information Intitude 35-52-607. Mailing Address: (Landod). Quy State City State <		Pump Installer's Completion Report		Aquifer: A	~ <i>c</i>)			
Date complete: Q-1B-10 P.O. Box 2309 Well x		Mississippi Department of Environmental Quarty		G1	10			
Date completed: 4-18-10	Driller: Joel Pieur	P.O. Box 2309		Well =:				
Core information from block on Part1 (601)961-5228 (fax) This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copp. of Part 1 of the report must be completed by a licensed water well contractor or a licensed pump installer. A copp. of Part 1 of the report must be completed by a licensed water well contractor or a licensed pump installer. A copp. of Part 1 of the report must be completed by a licensed water well contractor or a licensed pump installer. A copp. of Part 1 of the report must be completed by a licensed water well contractor or a licensed pump installer. A copp. of Part 1 of the report must be completed by a licensed water well contractor or a licensed pump installer. A copp. of Part 1 of the report must be completed by a licensed water well contractor or a licensed pump installer. A copp. of Part 1 of the report must be completed by a licensed must be address within 20 does of vell completion. Well Owner Information Well Owner Information Owner Name: Address: Well Owner Information State 10 does of vell completion. Well Owner Name: State 10 does of vell completion. Well Owner Name: State 20 Code This part of the report must be above statements well be part of the above difference on the table of the table of the table. The part of the report must be above statements are true to the best of my knowledge. Nethod of Measuring Line Mather statements are true to the best of my knowledge. Mather state wel	Data completed: 4-18-10	Jackson, MS 39225						
This part of the report must be completed by a licensed water well contractor or a licensed pump installer. Accept of Part 1 of the report must be attached and both purs filed with the Department or the above address within 30 days of well completion. Well Owner Name: Statuant Structure Information Owner Name: Statuant Structure Information or the above address within 30 days of well completion. Well Owner Name: Conventional Survey. Mailing Address: Updle put Statu filed. Latitude: 30-52-607. Longitude 30-36-56.3 Mailing Address: Updle put Statu filed. Method of Lat Long (check one): Conventional Survey. (uudal. ND: 39452 Num ': NM ': Sec 73: 1.25: R.Gul. (ind.): 508-2809 Jistance Direction Nearest Town 3: Miles Zeells. of Lauxdaft; uss Jistance Direction Nearest Town Air Lift Test Submersible Diesel Engine Gasoline Engine Natural Gas Bucket Piston Turbine Vindmill Other (specify): Date Pump Installed: 4: 16: 10 Gallons Per Minute Number of Stages. Z Date Well Tested (B): 50: Feet Below Land Surface Niethod of Nearing Water Level Circle one Circle one Static Water Level (A): Z Feet Below Land Surface Performation Nearest Town Give one Date Well Tested: 10: Gallons Per Minute				Elevation:				
Well Over Information Well Charles Information Information Information Well Charles Information Information Information Well Charles Information Information Information Information Information Well Charles Information Information Information Information Information Information Information Information Information </td <td colspan="8">in the second pump installer. A copy of Part 1 of the</td>	in the second pump installer. A copy of Part 1 of the							
Well Owner Name: State Minimum Mailing Address: Long Conventional Survey Mailing Address: Long Check one): Conventional Survey Mailing Address: Long Check one): Conventional Survey USGS quad Mailing Address: Long Check one): Conventional Survey USGS quad Mailing Address: Conventional Survey USGS quad Mailing Address: Conventional Survey USGS quad Mailing Check one): Conventional Survey USGS quad Mailing Check one): Conventional Survey USGS quad Maile State Zip Code Pump Type Circle one Circle one Air Lift Distance Maintel Gasoline Engine Natural Gas Backet Pinp Type Circle one Circle one Mailes Secting Motor: Miles Secting Motor: Distance <t< td=""><td colspan="8">This part of the report must be completed by a licensed water well contractor of a licensed pump. This part of days of well completion.</td></t<>	This part of the report must be completed by a licensed water well contractor of a licensed pump. This part of days of well completion.							
Mailing Address Image for the former of	Well Owner Information	Da						
Mailing Address Image for the former of	the second second	Latitude: 30-52-607		Longirude: <u>88 - 76 - 76 -</u>				
Maining Address		had	Method of Lat Long (check one): Conventional Survey					
Image: Non-angle of the second se	Mailing Address: 1900 PC Matter Comment		USGS quad, Hand-held GPS Survey-grade GPS					
City State Zip Code Distance Direction Nearest Town Telephone No. (GOL). 508 - 2809 3 Miles 3 Mile	(undal) MD 39457		NW 1/2 NW 1/4 Sec 73 T25 R GW					
Pump Type Circle one Power Type Circle one Air Lift Image: Submersible Bucket Piston Turbine Diesel Engine Gasoline Engine Natural Gas Bucket Piston Centrifugal Rotary Plump Type Gasoline Engine Centrifugal Rotary Plump Type Gasoline Engine Other (specify):		Zip Code	Distance Direction	Nearest Town				
Pump Type Circle one Power Type Circle one Air Lift Ier Submersible Bucket Piston Turbine Bucket Piston Turbine Centrifugal Rotary Flowing Well Other (specify):	Telephone No. (60) 508-2809		3 Miles Full of Landaly us					
Pump Type Circle one Air Lift Turbine Circle one Bucket Piston Turbine Diesel Engine Gasoline Engine Natural Gas Bucket Piston Turbine Steerie Motor Hand Tractor PTO Centrifugal Rotary Flowing Well Windmill Other (specify):			<u></u>					
Air Lift Image: Submersible Diesel Engine Gasoline Engine Natural Gas Bucket Piston Turbine Hand Tractor PTO Centrifugal Rotary Flowing Well Windmill Other (specify):	· · · ·		5		4 -			
Air Lift It Submersible Diesel Engine Galonie Engine Bucket Piston Turbine Hand Tractor PTO Centrifugal Rotary Flowing Well Windmill Other (specify):	Circle one		Carol	ina Engine	Natural Gas			
Bucket Piston Turbine Becric Motor Fland Centrifugal Rotary Flowing Well Windmill Other (specify):	Air Lift Jet	Submersible	Diesel Engine Gasol	ille Englise				
Centrifugal Rotary Flowing went International content of the second secon	Bucket Piston	Turbine	Execute meter					
Other (specify):	Centrifugal Rotary	Flowing Well		1				
Date Pump Installed: 4 - 18 - 10 Rated Pump Capacity: 10 Gallons Per Minute Pump Test Data Number of Stages: 2 Date Well Tested: 4 - 18 - 10 Setting Depth: Circle one Static Water Level (A): 7 Feet Below Land Surface Air Line Electric Measuring Line Steel Tape Other (specify):	Other (specify)	Horse Power Rating of Motor:						
Rated Pump Capacity: O Gallons Per Minute Number of Stages: A Pump Test Data Method of Measuring Water Level Circle one Date Well Tested: U - 10-10 Air Line Electric Measuring Line Steel Tape Static Water Level (A): Z Feet Below Land Surface Other (specify): Other (specify): Pumping Water Level (B): 50 Feet Below Land Surface For flowing well. measured shut in head:	Date Pump Installed: 4-18-10	Setting Depth:						
Pump Test Data Method of Measuring Water Level Circle one Date Well Tested: <u>U</u> -10-10 Static Water Level (A): Z Feet Below Land Surface Feet Below Land Surface Drawdown [(B) - (A)]: Z Feet Below Land Surface Other (specify): Test Pumping Rate: 10 Gallons Per Minute C Duration of Pump Test (minimum 4 hours): <u>48</u> hours I HEREBY CERTIFY that the above statements are true to the best of my knowledge. MAY 1 9 2010 I HEREBY CERTIFY that the above statements are true to the best of my knowledge. MAY 1 9 2010	Rated Pump Capacity:	_Gallons Per Minute	Number of Stages:					
Pump 1 est Data Circle one Circle one Date Well Tested: <u>4 - 10 - 10</u> Static Water Level (A): <u>7</u> Feet Below Land Surface Pumping Water Level (B): <u>50</u> Feet Below Land Surface Electric Measuring Line Steel Tape Drawdown [(B) - (A)]: <u>2</u> Feet Below Land Surface Other (specify):								
Dare Well Tested: <u>U-10-10</u> Static Water Level (A): Z Feet Below Land Surface Pumping Water Level (B): 50 Feet Below Land Surface Drawdown [(B) - (A)]: 2 Feet Below Land Surface Test Pumping Rate: 10 Gallons Per Minute Duration of Pump Test (minimum 4 hours): <u>48</u> hours I HEREBY CERTIFY that the above statements are true to the best of my knowledge. <u>MAY 19 2010</u>	Pump Test Data	Pump Test Data			Method of Measuring Water Level			
Static Water Level (A): Z Feet Below Land Surface Pumping Water Level (B): 50 Feet Below Land Surface Drawdown [(B) - (A)]: 2 Feet Below Land Surface Test Pumping Rate: 10 Gallons Per Minute Duration of Pump Test (minimum 4 hours): 48 hours I HEREBY CERTIFY that the above statements are true to the best of my knowledge. Feet after MAY 19 2010	-				Steel Tape			
Pumping Water Level (B): 50 Feet Below Land Surface Drawdown [(B) - (A)]: 2 Feet Below Land Surface Test Pumping Rate: 10 Gallons Per Minute Duration of Pump Test (minimum 4 hours): 48 hours I HEREBY CERTIFY that the above statements are true to the best of my knowledge. Feet after 916/000000000000000000000000000000000000				1				
Drawdown $[(B) - (A)]$:Feet Below Land Surface Test Pumping Rate:O Gallons Per Minute Duration of Pump Test (minimum 4 hours):HS hours I HEREBY CERTIFY that the above statements are true to the best of my knowledge. 0 - 780 For flowing well, measured shut in head:reet Well yieldedOGPM with a drawdown of Feet after hours of pumping DI Feet after HS hours of pumping HAY 19 2010	Static Water Level (A). 50 Feet Below Land Surface		Other (specify):					
Drawdown [(B) - (A)].	Pumping water Level (B) Foot Below Land Surface		For flowing well, measure	d shut in head:	feet			
I fest Pumping Kate.			Well vielded (O GPM with a drawdown of					
I HEREBY CERTIFY that the above statements are true to the best of my knowledge. RECENTED 10.0 Prove 0.780	Test Pumping Rate:	Well Steldeu	JQ.	hours of numping				
I HEREBY CERTIFY that the above statements are true to the best of my knowledge. MAY 19 2010	Duration of Pump Test (minimum 4 hours	s): <u>48</u> hours	feet atte	er				
I HEREBY CERTIFY that the above statements are true to the best of my knowledge. MAY 19 2010	······			<u> </u>	ECENED			
Dellau D-780	I HEREBY CERTIFY that the above statements are true to the best of my knowledge.							
Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer Form: OLWR-SWR 18/04/08)	Delleville D-780							