

County: Green
 Permit #: _____
 Driller: David L. Cimini
 Date drilling completed: 1-26-19

State Well Report
Part 1 - Driller's Log
 Mississippi Department of Environmental Quality
 Office of Land and Water Resources
 P.O. Box 2309
 Jackson, MS 39225
 (601)961- 5210
 (601)961- 5228 (fax)

For Office Use Only:
 Aquifer: A 88
 Well #: _____
 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.

<p>Information on Well Owner <i>(Landowner if borehole is not for a water well)</i> Owner Name: <u>Vanessa Freeman</u> Mailing Address: <u>672 Lovewell Rd</u> <u>Richton Ms 39476</u> City State Zip Code Telephone No. <u>(601)-525-6209</u></p>	<p>Well or Borehole Location Latitude: <u>31.22.22</u> Longitude: <u>88.48.24</u> Method of Lat/Long (circle one): <u>20.08</u> Conventional Survey, <u>24.90</u> USGS quad, Hand-held GPS, Survey-grade GPS <u>MNW</u> <u>ENW</u> <u>2928</u> Twn <u>5N</u> Rng <u>8W</u> Distance <u>3</u> Miles Direction <u>West</u> of Nearest Town <u>SAND hill, MS</u></p>
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Well / Borehole Data

Date drilling started: 1-22 Date drilling completed: 1-26 Hole depth: 180' Hole diameter: 4"

Location of the source of any surface water used for drilling: Community water System
 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: _____
 Name of organization running log(s): _____

Purpose of borehole (check one): Water Well X 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: Farm

If a flowing well, method of flow regulation: Valve _____ Other (describe) _____

Static Water Level: 30 feet above or below (circle one) land surface Date measured: 1-26-19

Method of Measurement (circle one) steel tape electric tape air line other: String

Well depth: 180 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 150 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 30 feet Screen diameter: 2 inches Type of screen: PVC

Screen slot size: #10 inches Setting depth: From 150 feet to 180 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: 140 feet. *If telescoped or more than one screen, describe on next page*

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Southern MS Water Well Drilling
 LC# 0-3731

Form: OLWR-SWR-1A (04/08)
Russell Cimini
 1/26/2019

STATE WELL REPORT

Part 2

Pump Installer's Completion Report
 Mississippi Department of Environmental Quality
 Office of Land and Water Resources
 P.O. Box 2309
 Jackson, MS 39225
 (601)961-5210
 (601)961-5228 (fax)

County: Covington
 Permit #: _____
 Driller: David L. Cain
 Date completed: 1-26-19
Copy information from block on Part 1

For Office Use Only:

Aquifer: A 88
 Well #: _____
 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 Information	Well Location
Owner Name: <u>VANESSA FREEMAN</u>	Latitude: <u>31° 22' 22" N</u> Longitude: <u>88° 48' 26" W</u>
Mailing Address: <u>672 Lovewell Rd</u>	Method of Lat/Long (check one): Conventional Survey <u>20.08</u> <u>24.90</u>
<u>Richmon</u> <u>Ms</u> <u>39476</u>	USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
City State Zip Code	<u>N</u> ^{NW} <u>1/4</u> <u>E</u> ^{NW} <u>1/4</u> Sec <u>29</u> ²⁸ T <u>5N</u> R <u>8W</u>
Telephone No. <u>(601) 525-6209</u>	Distance Direction Nearest Town <u>3</u> Miles <u>West</u> of <u>SAND HILL, MS</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet <u>Submersible</u>	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston Turbine	<u>Electric Motor</u> Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>1 hp</u>
Date Pump Installed: <u>1-25-19</u>	Setting Depth: <u>130</u> feet
Rated Pump Capacity: <u>10</u> Gallons Per Minute	Number of Stages: <u>13</u>

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Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>1-25-19</u>	Air Line Electric Measuring Line Steel Tape
Static Water Level (A): <u>30</u> Feet Below Land Surface	Other (specify): <u>string</u>
Pumping Water Level (B): <u>60</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>30</u> Feet Below Land Surface	Well yielded <u>15</u> GPM with a drawdown of
Test Pumping Rate: <u>15</u> Gallons Per Minute	<u>30</u> feet after <u>4</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>4</u> hours	

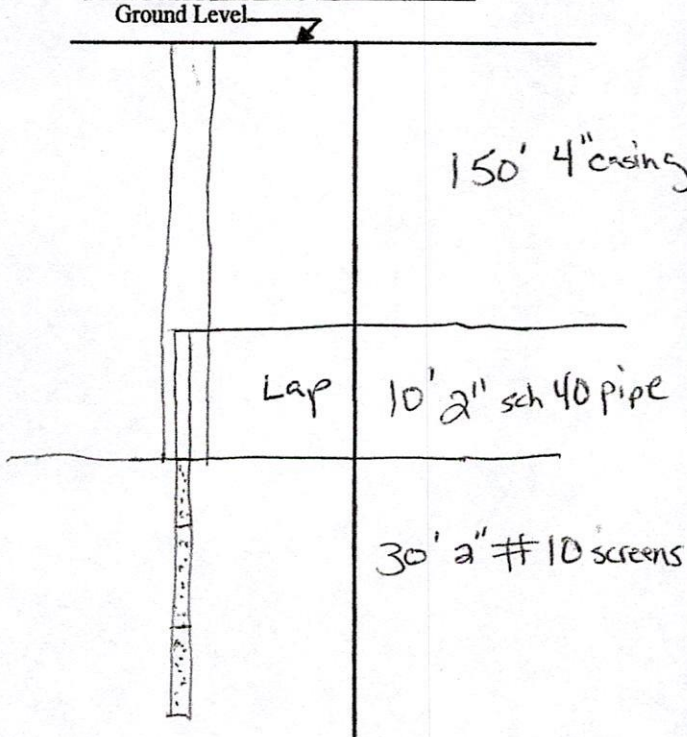
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

S. Ms Water Well Drilling David L. Cain
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

LO# 03831 1/26/2019 Form: OLWR-SWR-1B (04/08)

The sketch below only required for water wells

If well telescopes, show depths on sketch.

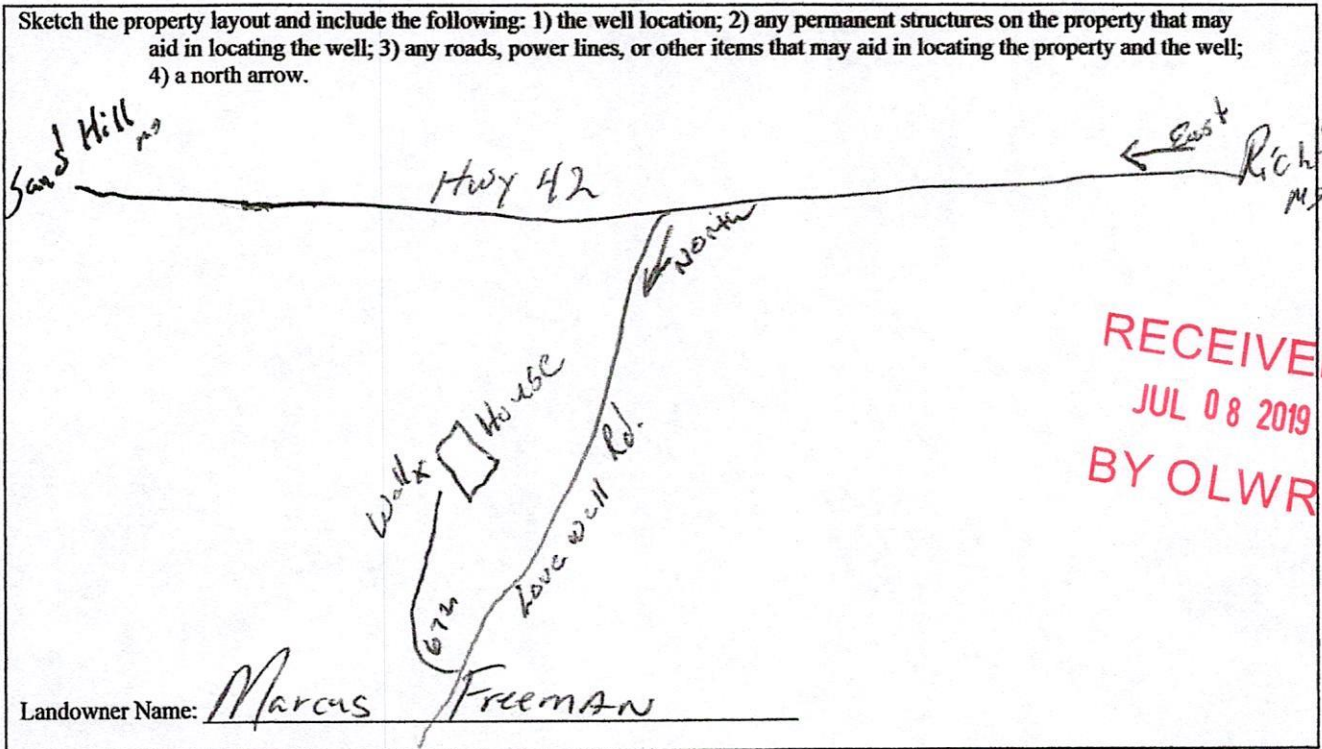


Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth)	To (depth)
Top/Soil	Ground Level	5
SAND	5	25
clay	25	55
6" Rock	55	55.4
clay	55.4	60
SAND	60	65
clay	65	68
SAND	68	73
clay	73	78
clay / sand strips	78	85
clay	85	90
Fine SAND	90	97
clay	100	115
SAND / crumbly clay	115	119
clay	119	148
Poppy SAND	148	155
clay strip	155	156
SAND	156	160
clay	160	165
Fine SAND	165	180

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.



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.

Print Name of Responsible Licensee and License No. Southern No Waterwell 1/24/2019 Date 1/24/2019 Signature of Licensee Russell Lewis