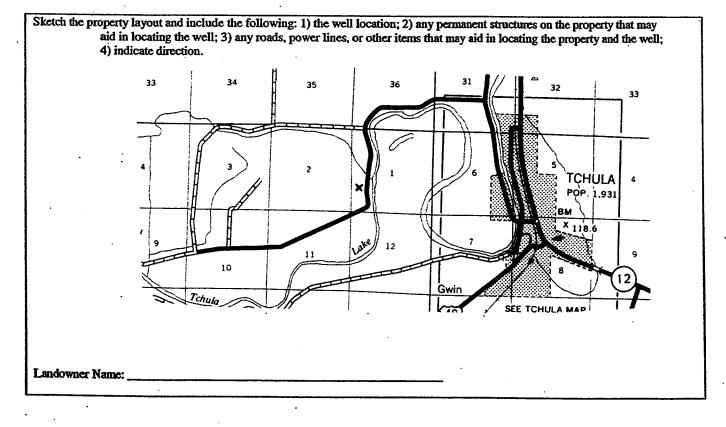
······	3 State Well Report	For Office Lies Only	
County: Holmes	Part 1	For Office Use Only:	
Permit # GW-40060	Mississippi Department of Environmental Quality	Aquifer:	
Irrigation Equipment	Office of Land and Water Resources P.O. Box 10631	Well #: <u>5-67</u>	
Driller:	Jackson, MS 39289-0631	L. S. Elevation:	
Date drilling completed: $3-14-05$	(601)961-5210	L. S. Elevation:	
	(601)354-6938 (fax)	E-log #:	
	port be prepared by the driller in detail and filed w	with the Department within	
30 days of completion of drillin Well Owner Inform		1 Location	
Graves Plac			
Uwner Name		N 90 15 36W	
Mailing Address: 3426 Amroth	Drive Method of Lat/Long (circle or	ne): Conventional Survey,	
	USGS mad. Mand-held	GPS, Survey-grade GPS	
Colliervill	e. TN 38017		
City St		TwnRng1W	
901-850-5	303 Distance Direction	Nearest Town	
Telephone No. ()	<u>2_Miles West</u>	of_Tchula	
· · · · · · · · · · · · · · · · · · ·	Well Data	· · · · · · · · · · · · · · · · · · ·	
	dustrial Public Supply (Irrigation) Fish Culture		
	05	3-14-05	
Date well drilling started: <u>3-14</u>	Date well drilling completed:	5-14-05	
If flowing, method of flow regulation: Va $10f+$	alve Other (describe)	3-14-05	
If flowing, method of flow regulation: Va $10f+$	Date well drilling completed: alve Other (describe) bove or below (circle one) land surface Date measured:	3-14-05	
If flowing, method of flow regulation: Va $10 { m ft}$. Static Water Level:feet a	alve Other (describe) bove or below (circle one) land surface Date measured:	3-14-05	
If flowing, method of flow regulation: Va 10 ft . Static Water Level:feet a Method of Measurement (circle one)	alve Other (describe) bove or below (circle one) land surface Date measured: seel tape electric tape air line other:	3-14-05	
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If flowing, method of flow regulation: Va 10ft. Static Water Level:feet a Method of Measurement (circle one) (a Hole depth: Well de Type of grout (circle one): Cement Casing length: feet Cas Screen length:feet Scr feet Scr o50 Screen slot size: inches Type of completion (circle all applicable): No log m Name of organization running log(s): I certify that the well was drilled, const Department of Environmental Quality a I r i gation Equipme	alve Other (describe)	3-14-05 10 feet PVC Sch.40 1 feet hole Natural Development veen, describe on back of page Other: requirements of the Mississippi	

MAR 2 3 2005 BY: OLWR If well telescopes please sketch below and show depths.



	Desc	ription of Formations Encountered	Front	Te
	Clay		0	21
	Fine	Sand	· 22	41
	Fine	Sand/Grave1	42	_70
	Med.	Sand/Gravel	71	121
•		·		
	J	·		
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	L			

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



Signature of Water Well Contractor

Holmes County: Permit # 40060 Irrigation Equipment Diller: 3-14-05 Date completed:		Pump Installer Mississippi Departme Office of Land P.O. Jackson, I (601)35	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)354-6938 (fax) are pump installer in detail and filed with the Department	
installation of p	ump.			Location
Well Owner Information Graves Place, LLC		Latitude:Longitude:		
Owner Name: Graves Place Mailing Address: 3426 Amroth			Method of Lat/Long (circle on	e): Conventional Survey,
Ci	ty Sta	Lie, TN 38017 te ZipCode	USGS quad, Hand <u>NW</u> ¹ / ₄ <u>SW</u> ¹ / ₄ Sec <u>1</u> Distance Direction	
Telephone No. ()1-850-53(Westof	Tchula
Pump Type Circle one		1	ver Type rcle one	
Air Lift	Jet	Submersible	Qiesel Engine Gasolin	e Engine Natural Ga
Bucket	Piston	Turbine	Electric Motor Hand	Tractor PT
Centrifugal	Rotary	Flowing Well	Windmill Other (specify):
Other (specify):		- <u></u>	Horse Power Rating of Motor:	60
Date Pump Installed:	3-14-05	5	Setting Depth:7	
) Gallons Per Minute	Number of Stages:1	
	Pump Test Da	ata		asuring Water Level role one
Date Well Tested:			Air Line Electric Meas	suring Line Steel Tape
		Feet Below Land Surface	Other (specify):	-
Pumping Water Leve	el (B):F	eet Below Land Surface		, ,,, w , , •••••••••••••••••••••••
Drawdown [(B) - (A)]:F	Feet Below Land Surface	For flowing well, measured sh	ut in head:fee
Test Pumping Rate:		Gallons Per Minute	Well yielded	_GPM with a drawdown of
Duration of Pump Te	est (minimum 4 hou	ırs):hours	feet after	hours of pumpi
I HEREBY CERTIF Patrick	M. Chism	atements are true to the best of 0695	of my knowledge. <i>UMUR</i> Signature of Pump In:	Chin

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> RECEIVED MAR 2 9 2005 BY: OLWR