

SWAREK #2

Humphreys

Part 2 never received 3/13

County: YAZOO
 Permit #: GW-45245
 Driller: J. NEWCOME O.773
 Date drilling completed: 5-7-2011

OK
 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)

State Well Report

Part 1

For Office Use Only:
 Aquifer: _____
 Well #: L103
 L. S. Elevation: _____
 E-log #: _____

State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.

Well Owner Information	Well Location
Owner Name: <u>World Ag Inc. / Swarek</u>	Latitude: <u>32.59.06</u> Longitude: <u>90.27.47</u>
Mailing Address: <u>1261 Pass Rd</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>
<u>Gulfport, MS 39051</u>	USGS quad, Hand-held GPS, Survey-grade GPS
City State Zip Code	<u>NW 1/4 SE 1/4</u> Sec <u>12</u> Twn <u>13N</u> Rng <u>03W</u>
Telephone No. () _____	Distance Direction Nearest Town
	<u>8</u> Miles <u>S</u> of <u>SILVER CITY</u>

Well Data

Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other: _____

Date well drilling started: 5-7-2011 Date well drilling completed: 5-7-2011

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

Static Water Level: _____ feet above or below (circle one) land surface Date measured: _____

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

Hole depth: 112 Well depth: 110 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 70 feet Casing diameter: 16 inches Type of casing: P.V.C.

Screen length: 40 feet Screen diameter: 16 inches Type of screen: P.V.C.

Screen slot size: .050 inches Setting depth: From 70 feet to 110 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: _____ feet. If telescoped or more than one screen, describe on back of page

Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: _____

Name of organization running log(s): _____

RECEIVED
 JUN 13 2011
 SW DEPT

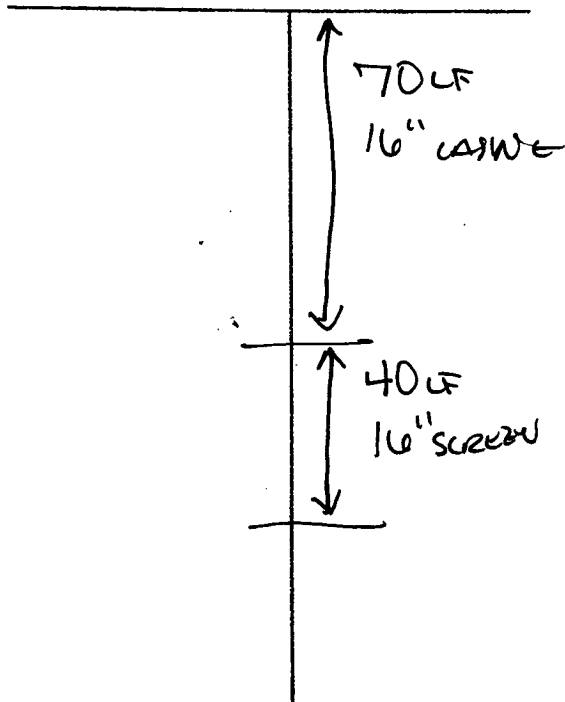
I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

JOHN NEWCOME O.773 _____
 Print Name of Water Well Contractor and License No. Signature of Water Well Contractor

no pump installed yet due to flooding / high water

If well telescopes please sketch below and show depths.

Ground Level



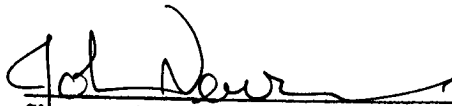
Description of Formations Encountered	From	To
TOP SOIL	0	10
CLAY	10	30
FINE / FAIR SAND	30	70
COARSE SAND / PEA GRAVEL	70	110
BOTTOM	110	112

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

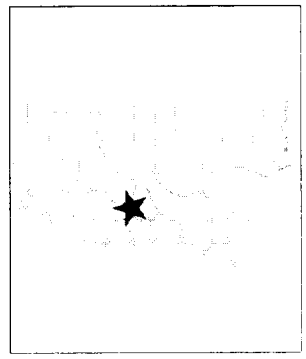
Sketch the property layout and include the following: 1) the well location; 2) any permanent structures on the property that may aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and the well; 4) indicate direction.

SEE MAT

Landowner Name: _____


Signature of Water Well Contractor

Internet Mapping Framework



Legend

- County Boundaries
- Township
- Public Land Survey System
- MS One Call Natchez Trace Parkway
- MS One Call Interstate Highway
- MS One Call US / State Highway
- MS One Call 3 digit State Highway
- MS One Call County Roads and Streets
- Incorporated Cities
- Other Urban (non-incorporated)
- NHD Other Areas (dbf streams and inun)
- adams07_m.sid
- alcom07_m.sid
- amite07_m.sid
- attala07_m.sid
- benton07
- bolivar07_m.sid
- calhoun07_m.sid
- carroll07_m.sid
- chickasaw07_m.sid
- choctaw07_m.sid
- ciaborne07_m.sid
- clarke07_m.sid

Scale: 1:21,281

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