County: Jones

Permit #:

Driller: Roy V. West Drilling

Date drilling completed: 6-7-06

State Well Report

Part 1

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)

For Office Use Only:

Aquifer:

Well #: P-52

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

Owner Name: Carral Walters

Mailing Address: 184 Bradley Rd

Ovett MS 39464
City State Zip Code

Telephone No. (601) 344-2506

Well Location

Latitude: 31°27'10" Longitude: 80°07'08" (89 08)

Method of Lat/Long (circle one): Conventional Survey, DOT MAP, USGS quad, Hand-held GPS, Survey-grade GPS

SE¼ NE¼ Sec 31 Twn 6N Rng 11W
NW SE 30

Distance 7 Miles Direction W of Nearest Town Ovett

Well Data

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

Date well drilling started: 6-7-06 Date well drilling completed: 6-7-06

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

Static Water Level: 90 feet above or below (circle one) land surface Date measured: 6-7-06

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

Hole depth: 244 Well depth: 244 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 224 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 20 feet Screen diameter: 4 inches Type of screen: PVC slotted

Screen slot size: .008 inches Setting depth: From 224 feet to 244 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):

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.

David A. West 0-672 — David A. West

Print Name of Water Well Contractor and License No. — Signature of Water Well Contractor

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BY: OLWR

P-52

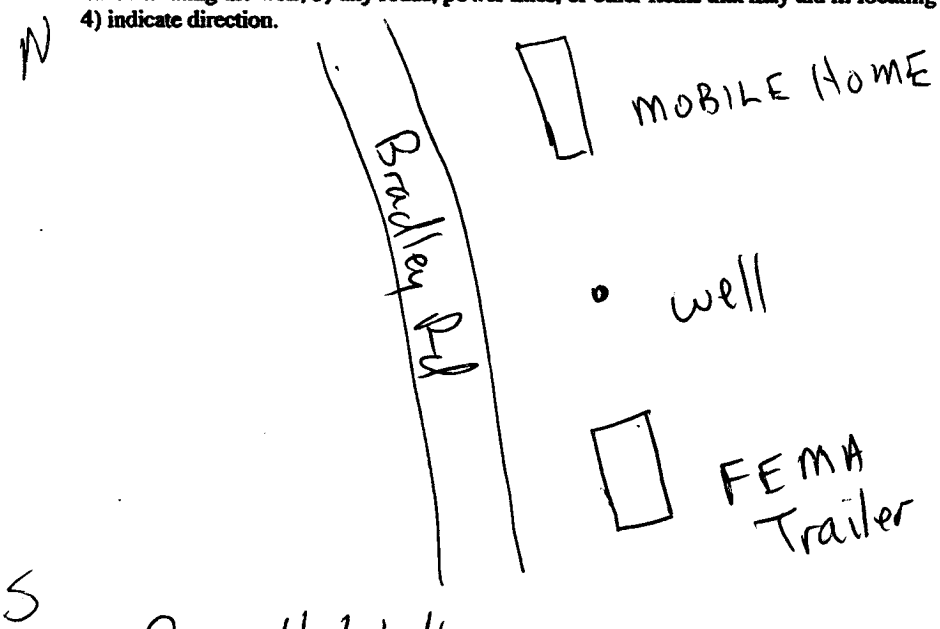
If well telescopes please sketch below and show depths.

Ground Level

Description of Formations Encountered	From	To
CLAY	0	12
SAND	12	38
Blue CLAY	38	197
Fine Sand	197	244

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.



Landowner Name: Carroll Walters

David A. West
Signature of Water Well Contractor

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JUN 30 2006
BY: OLWR

STATE WELL REPORT
Part 2

County: Jones

Permit #:

Driller: Roy V. West Drilling

Date completed: 6-7-06

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)961-5210
(601)354-6938 (fax)

For Office Use Only:

Aquifer:

Well #: P-52

Elevation:

This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump.

Well Owner Information

Owner Name: Carral Walters

Mailing Address: 184 Bradley Rd

Ovett MS 39464
City State Zip Code

Telephone No. (601) 344-2506

Well Location

Latitude: 31°27' Longitude: 80° 07'

Method of Lat/Long (circle one): Conventional Survey, DOT MAP, USGS quad, Hand-held GPS, Survey-grade GPS

SE ¼ NE ¼ Sec 31 Twn 6N Rng 11W

Distance 7 Miles Direction W of Nearest Town Ovett

Pump Type
Circle one

Air Lift, Jet, (Submersible), Bucket, Piston, Turbine, Centrifugal, Rotary, Flowing Well

Other (specify):

Date Pump Installed: 6-7-06

Rated Pump Capacity: 27 Gallons Per Minute

Power Type
Circle one

Diesel Engine, Gasoline Engine, Natural Gas, (Electric Motor), Hand, Tractor PTO, Windmill, Other (specify):

Horse Power Rating of Motor: 2

Setting Depth: 160 feet

Number of Stages:

Pump Test Data

Date Well Tested:

Static Water Level (A): Feet Below Land Surface

Pumping Water Level (B): Feet Below Land Surface

Drawdown [(B) – (A)]: Feet Below Land Surface

Test Pumping Rate: Gallons Per Minute

Duration of Pump Test (minimum 4 hours): hours

Method of Measuring Water Level
Circle one

Air Line, Electric Measuring Line, Steel Tape

Other (specify):

For flowing well, measured shut in head: feet

Well yielded GPM with a drawdown of

feet after hours of pumping

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

David A. West 0-672
Print Name of Pump Installer and License No. (if applicable)

David A. West
Signature of Pump Installer

RECEIVED
JUN 30 2006
BY: OLWR