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STATE WELL REPORT

County: Kemper Permit #: Driller: David West Date drilling completed: 11-21-2020 Part 1

Driller's Log
Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309 Jackson, MS 39225-2309

(601)961-5555 (601)961-5228 (fax)

For C	ffice	Use Only:	
Well #:	Q	18	
Aquifer:			
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.

Well Owner Information	Well or Borehole Location
(Landowner if borehole is not for a water well)	Latitude: 32.656787 Longitude: 88.818322
Owner Name: Advanced Resources Inc.	
Mailing Address: 1210 Keng Saw Ave	Method of Lat/Long (check one): Conventional Survey,
Suite 1210 A	USGS quad, Hand-held GPS_X, Survey-grade GPS
	NW 1/4 SE 1/4, Sec T GN R SE
\(\frac{\sqrt{no\xi\left\rangle}}{\text{City}} \) \(\frac{\sqrt{no\xi\left\rangle}}{\text{State}} \) \(\frac{\sqrt{no\xi\left\rangle}}{\text{City}} \) \(\f	
	O Miles 30 of Devalo
Telephone No. (865) 240-3944	(Distance) (Direction) (Nearest Town)
Well / B	orehole Data RECEIVES
Date drilling started: 11-20-30 Date drilling completed:	
	11-11 1 4 7070
Location of the source of any surface water used for drilling	is: Theyon Lean Moore Ird.
Method of dosing and volume of Chlorine used in drilling a	nd development: Tabs 50 PMY OLVIN
Logs run (check all applicable): \(\sqrt{log run} \sqrt{lectric} \sqrt{bamr}	na Ray Density Sonic Neutron Other:
Name of organization running log(s):	
	The state of the s
Purpose of borehole (check one): Water Well X Geotechni	ical/Geological Investigation Ground Source Heat Pump
Seismic Survey Other	(describe)
If drilling is not related to water well c	onstruction, skip the remainder of this block
Purpose of Well (check all applicable): Home Industria	Public Supply Irrigation Fish Culture
Other (describe): Lig Supply	305 st
If a flowing well, method of flow regulation: Valve	Other (describe)
Static Water Level: 1571 feet Dabove or belo	ow] land surface Date measured: 11-21-20
Markad at a successive (at a transfer of t	. D Day Sance
Method of measurement (check one) Steel tape Electric	그리기 아마이아 그렇게 하는데 가게 되었다면 그렇게 하는데 하는데 가게 되었다. 이 나고 생각 때에 하는데 이 바람들이 하는데 그는데 되었다면 하는데 하는데 하나 하는데 하나 때문에 되었다.
Well depth: 185 Well grouted to a depth of: 20 f	eet Type of grout (check one) Neat Cement Bentonite Mix
Casing length: 445 feet Casing diameter:	inches Type of casing: PAC
Screen length: 40 feet Screen diameter:	inches Type of screen:
Screen slot size:	From LILS feet to LISS feet
Type of completion (check all applicable) ravel packed	
Other (describe):	
Top of lap pipe or reduction in casing:feet	
If telescoped or more than	one screen, describe on next page

Form: OLWR-SWR-1A (4/13)

Permit #:	We	For Office Use	
The sketch below only required for water wells	Description of formations encoun		
	and boreholes, unless specifically	exempted by regulation	ons
f well telescopes, show depths on sketch.	Description of Formations Encountered	ed From (depth)	To (depth)
Ground Level	Fil	Ground level	<u>ک</u>
The same of the sa	Clay	a	90
	Clay w/Sand = how/speace	NS 90	390
	Sand - modium	390	440
	Sand-Couse	440	485
		14 / 14 / 14 / 14 / 14 / 14 / 14 / 14 /	
	22.8		
	10 10 10 10 10 10 10 10 10 10 10 10 10 1		
and the second second	A STATE OF STATE OF SHALL STATE		Barry Island
			ar Andropalist
	trace and security at the state	garji a jalka ikis a	
f more than one screen, show location of each on sketch			
	aid in locating the well in locating the property and the well	N RE	ECEIV EC 1420
etch the property layout and include the following: 1) the well location 2) any permanent structures on the property that may 3) any roads, power lines, or other items that may aid 4) north arrow	in locating the property and the well	N RE	ECEIV EC 1420 OLW
etch the property layout and include the following: 1) the well location 2) any permanent structures on the property that may 3) any roads, power lines, or other items that may aid 4) north arrow Hause Len Mose Ad - Dirray	in locating the property and the well		ECEIV EC 1420 OLW
etch the property layout and include the following: 1) the well location 2) any permanent structures on the property that may 3) any roads, power lines, or other items that may aid 4) north arrow Hause Lean More Ad - Dirray	in locating the property and the well		ECEIV EC 1420 OLW
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etch the property layout and include the following: 1) the well location 2) any permanent structures on the property that may 3) any roads, power lines, or other items that may aid 4) north arrow Hause Lean Moore Ad - Dirray	in locating the property and the well	works with all angli	Cable regulations,
etch the property layout and include the following: 1) the well location 2) any permanent structures on the property that may 3) any roads, power lines, or other items that may aid 4) north arrow House Lean Moore Au - Diracular and and and a source of the Mississippi Department of Environments	in locating the property and the well \(\lambda \) \(\lambda \	works with all angli	CETV EC 14 20 Cable regulations,

STATE WELL REPORT

County: Kemper

Driller: Dand West

Date completed: 1/2/2020

Copy information from block on Part 1

Permit #:

Pump Installer's Completion Report Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 2309 Jackson, MS 39225-2309 (601)961-5210 (601) 360-0535 (fax)

For (Office I	Jse Only:
Well #:	9	18
Aquifer:		

This part of the report must be completed by a licensed water of the report must be attached and both parts filed with the D	well contractor or a licensed pump installer. A copy of Part 1 epartment at the above address within 30 days of well completion.			
Well Owner Information	Well Location			
Owner Name: Mayon ced Resources Inc.	Latitude: 32.65(098) Longitude: -88.818322			
Mailing Address: 1210 KenoSaw Ave	Method of Lat/Long (check one): Conventional Survey,			
Suite 12/0A	USGS quad, Hand-held GPS_X, Survey-grade GPS			
Unoxville TW 37919-7736, City State Zip Code	W 1/4 SE 1/4, Sec 1 T 9N R 1SE			
[2012년: 1912년 전 12] [2] 12] [2] 12일 [2] 2 (2) 2 (2) 2 (2) 2 (2) 2 (2) 2 (2) 2 (2) 2 (2) 2 (2) 2 (2) 2 (2) 2 (2	8 Miles >W of 1)e Val D			
Telephone No. (866) 240-3944	(Distance) (Direction) (Nearest Town)			
Pump Typ	pe (check one)			
Submersible \square Turbine \square Air Lift \square Centrifugal \square Flowing Well \square	Det Piston Rotary Dther (describe):			
Date Pump Installed: 11-21-20	lated Pump Capacity:			
Is This Pump (check one): New Repaired Replacemen	it IX Aprileal			
Power Ty	pe (check one)			
Electric Diesel Gasoline Natural Gas Tractor PTO Win	dmill Other (describe):			
Horse Power Rating of Motor: 0,5 Setting Depth: 240 feet Number of Stages:				
Pump Test Data for Non Flowing Well				
Date Well Tested:	Duration of Pump Test (minimum 4 hours): hours			
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				
Method of measurement (check one): Steel tape ☐Electric ta	pe Air line Other (describe):			
Pump Test Dat	a for Flowing Well			
Measured shut in head:feet.				
Well yieldedGPM with a drawdown of	feet afterhours of pumping			
Meter	installation			
Meter Manufacturer:	Meter Serial Number:			
Meter Model Number/Name:	Type of Meter: RECFIVE			
Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):				
Installation Date: Meter installed by:				
Is This Meter (check one): New Repaired Replacement				
Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.				
I HEREBY CERTIFY that the above statements are true to th	e best of my knowledge			
Ourdwest 0-672	12-22-02 / ADAIM			
Print Name of Pump Installer and License No. (if applicable)	Date Signature of Pump Installer			

Form: OLWR-SWR-2A (4/13)