State Well Report		For Office Use Only:		
Part 1 - Driller's Log		Aquifor: 582		
County: Acquell Mississippi Department of Environmental Quality Office of Land and Water Resources		Weil #:		
D D D 10621		L. S. Elevation:		
Driller Forry Caypenter Jackson, MS 39289-0631 (601)961-5210		L. S. Elevanor.		
Date drilling completed: 1-23-2012 (601)961-5210 (601)354-6938 (fax)		B-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 or Borehole Location				
Information on Well Owner	*****	_ 1		
(Landowner if borehole is not for a water well)	Latitude: 34 • 15 '00	_" Longitude: <u>89 • 38 · 57 "</u>		
Owner Name Daryl South	Method of Lat/Long (circle or	ne): Conventional Survey,		
Mailing Address: 33 County Rd 348	ss: 33 County 12 340. USGS quad, Hand-held			
	50 12 W 1 Sm 35	Twn 95 Rng 4W		
City State Zip Code Distance Direction Miles 5W		Nearest Town		
Telephone No. (801) 591 - 5994	Mues 500	01		
Well / Borehole Data				
Date drilling started: 1-23-12 Date drilling completed: 1-23-12 Hole depth: 1/4 Hole diameter: 8				
Wethod of dostilk and solution of company and a series	•	L to 1 bec No. War		
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 Geotechnical/Geological Investigation Ground Source Heat Pump				
Seismic SurveyOther (describe If drilling is not related to water well construction)	lock		
Purpose of Well (check one): Home Industrial Public Supply Irrigation Fish Culture Other:				
If a flowing well, method of flow regulation: Valve C	Other (describe)			
Static Water Level: 65 feet above of below (circle one) land surface Date measured: 1-24-12				
Method of Measurement (circle one) (steel tape) electric tape air line other:				
Well depth: /// Well grouted to a depth of 16 feet Type of grout (circle one) Neat Cement Bentonite Mix				
Casing length: 94 feet Casing diameter: 4 inches Type of casing:				
Screen length: 20 feet Screen diameter: 4 inches Type of screen: PUC				
Screen slot size:	94 feet to	/ / 4fcct		
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 next page				

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The sketch below only required for water wells	Descript
	10

If well telescopes, show depths on sketch. Ground Level

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)
	Ground Level	
Sufre Soil	0	18
ned Kel Sand	18	30
Whate fire Sand	37	48
White Clay	48	60
Coarse White Sort	60	114
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if more than one screen, show location of each on sketch

Sketch the property layout and include the following: 1) the aid in locating the well; 3) any roads, power 1: 4) a north arrow.	lines, or other items that may aid in locating the property and the well;
	• Well
	hoperty Huse
	Drivery !
Landowner Name: Dary South	
J	Form: OLWR-SWR-14

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

Print Name of Responsible Licensee and License No.

Signature of Licensee

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STATE WELL REPORT Part 2 For Office Use Only: Pump Installer's Completion Report Mississippi Department of Environmental Quality Aquifer: Office of Land and Water Resources P.O. Box 10631 J82 Well #: Jackson, MS 39289-0631 Date completed: 1-24-2013 (601)961-5210 Elevation: (601)354-6938 (fax) Copy information from block on Part 1 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 Location Well Owner Information Latitude: 34° 15.00 Longitude: 49° 38-57 Method of Lat/Long (check one): Conventional Survey_____ USGS quad____, Hand-held GPS____ Survey-grade GPS____ Distance Direction Nearest Town Telephone No. (81) 591-5994 4 Miles Su' of Taylor Power Type Pump Type Circle one Circle one Submersible Diesel Engine Gasoline Engine Natural Gas Air Lift let Electric Motor Hand Tractor PTO Bucket Piston Turbine Other (specify): _ Windmill Flowing Well Centrifugal Rotary Horse Power Rating of Motor: Other (specify): Date Pump Installed: 1-24-12 Number of Stages: // Rated Pump Capacity: /Z Gallons Per Minute Pump Test Data Method of Measuring Water Level Circle one Date Well Tested: 1-24-12 Steel Tape Air Line Electric Measuring Line Static Water Level (A): 65 Feet Below Land Surface Other (specify): Pumping Water Level (B): 60 Feet Below Land Surface Drawdown [(B) - (A)]: ______ Feet Below Land Surface For flowing well, measured shut in head: feet Test Pumping Rate: / Gallons Per Minute Well yielded _____ GPM with a drawdown of feet after 4 hours of pumping Duration of Pump Test (minimum 4 hours): 4 hours

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

Larry Carpenter # C - 162

Print Name of Pump Installer and License No. (if applicable)

Signature of Pump Installer

Form: QLWR-SWR-1B CLWR