Sta	ate Well Report For Office Use Only:						
County: LAUDERDALE 075	Part 1 Aquifer:						
Mississippi De	partment of Environmental Quality of Land and Water Resources Well #: #- 101						
Tollik II. NIS GVI 19992	P. O. Box 10631						
Driller: LAYNE-CENTRAL Company Ja	ckson, MS 39289-0631						
Date Drilling Completed: 4/9/04	(601) 354-6938 (fax) E-Lot #:						
State Law requires that this report be prepared within 30 days of completion of drilling of the we	by the driller in detail and filed with the Department ll.						
Well Owner Information	Well Location						
Owner Name NORTH LAUDERDALE WATER ASSOC	Latitude:° Longitude:° "						
Mailing Address: PO BOX 143	Method of Lat/Long (circle one): Conventional Survey						
	USGS quad, Hand-Held GPS, Survey-grade GPS						
BAILEY, MS 39320	9 4 5ec 1 Twn 7N Rng 16E						
City State Zip Co	ode Distance Direction Nearest Town						
Telephone No. (601) 681-6157	3 Miles NORTH of MARION						
	Well Data						
Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other: -							
Date well drilling started: 1/16/04 Date well drilling completed: 4/9/04							
If flowing, method of flow regulation: Valve N/A Other (describe) —							
Static Water Level: 238' feet above or below (circle one) land surface Date Measured: 4/7/04							
Method of Measurement (circle one) steel tape electric tape air line Other: -							
Hole depth: 780' Well depth:	505' Well grouted to a depth of 445' feet						
Type of grout (circle one)	ent Bentonite Mix						
Casing length: 445 feet Casing diameter	:: 16 inches Type of casing: STEEL, EPOXY COATED						
Screen length: 55 feet Screen diameter	: 10 inches Type of screen: STAINLESS, ROD-BASED						
Screen slot size: 0.025 inches	Setting depth: From 450 feet to 505 feet						
Type of completion (circle all applicable): Gravel Packed	Underreamed Telescoped Open Hole Natural Development						
Other (describe	2):						
Top of lap pipe or reduction in casing: 390 fe	et. 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): LAYNE-CENTRAL,	JACKSON, MS						
I certify that the well was drilled, constructed and completed in accordance with applicable requirements of the Mississippi							
Department of Environmental Quality and/or the Mississip	pi Department of Health regulations and state laws.						
	Kalal Mayer						
LAYNE-CENTRAL Print Name of Water Well Contractor and License No.	Signature of Water Well Contractor						
Zama a mana or more more confidence and Diverse 140.	Signature of the contractor						

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If well telescopes, please sketch below and show depths.

H-101

Ground level	Description of Formations Encountered	From	То
	CLAY	0	155
	CLAY W/ LIGNITE	155	186
	CLAY	186	216
	CLAY W/ LIGNITE	216	276
	CLAY W/ SHELL	276	306
	CLAY W/ SAND STREAKS	306	395
	CLAY W/ STREAKS FINE SAND	395	430
	SAND / STREAKS OF CLAY	430	448
	SHALE	448	452
	COARSE SAND	452	514
	SAND	514	518
	STREAKS SAND & SHALE	518	592
	SHALE / SANDY HARD STREAKS	592	667
	SAND / CLAY/ HARD STREAKS SHALE	667	673
	ROCK APPROX. 4"	673	
	SANDY CLAY	673	680
	ROCK 4"	680	
E 1 2 2 1	CLAY / SHALE/ ROCK STREAKS	680	784

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.

RUSSELLTOFTON RD

NORTH

WELL

HWY 45

Landowner's Name: NORTH LAUDERDALE WATER ASSOCIATION

By: Signature of Water Well Contractor

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APR 1 3 2005 BY: OLW R

State Well Report

			Part 2			For Office Use Only:			
County:LA	UDERDALE		r's Completion						
,		Mississippi Departme							
Permit #: MS	S-GW-16002	Office of Land		source	es A	quifer:			
D 111	ALL COLUMN 1.		. Box 10631	21		7a11 #.	11 101		
Driller: LAY	NE-CENTRAL		MS 39289-06 1) 961-5210	31	"	/ell #: _	H-101		
Date Drilling Comple	ted: 4/0/04		354-6938 (fax)	1	l _E	levation:			
_		(001)	754-0750 (lux)	,		10 vation			
Copy information from					L_				
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 of the above address within 30 days of well completion.									
	rtment of the al	ove ad	Well L	ocation	of well completion.				
Well Owner Information		<u> </u>							
Owner Name NORTH LAUDERDALE WATER ASSOC.			Latitude:	_°		Longitude			
Mailing Address: Po	O BOX 143		Method of Lat/Long (circle one): Conventional Survey						
			USGS quad	l ,	Hand-Held C	SPS,	Survey-grade GPS		
R	AILEY, MS	39320	1/4	1/4	Sec 1	Twn	7N Rng 16E		
City		Zip Code	— <i>'</i> -	_ ′*		_ ` '''	100		
City	y State	Zip Couc	Distance		Direction	ı	Nearest Town		
Telephone No. (601) 681-6157		3 M	files	NORTH	of	MARION		
Totophone 140.	001 / 001-015/		J		HORIII		MANION		
	Pump Type				Power				
	Circle One				Circle	e One			
Air Lift	Jet	Submersible	Diesel Eng	gine	Gasoline	Engine	Natural Gas		
Dualeat	Digton	Tunking	Electric M	atar	П	n d	T-notor PTO		
Bucket	Piston	Turbine	Electric Mo	otor	На	na	Tractor PTO		
Centrifugal	Rotary	Flowing Well	Windmi	ll	Other	(specify):	-		
Other (specify):	_		Horse Power	Rating	of Motor:		100 HP		
Date Pump Installed: APRIL 2004		Setting Depth: 350 feet		feet					
Rated Pump Capacity	800	Gallons Per Minute	Number of St	ages:	6				
		-	<u> </u>				_		
	Pump Test Data		Υ ····································	Most	od of Masser	ring Wat-	r I ovel		
	i ump 1 est Data		Method of Measuring Water Level Circle One						
Date Well Tested:	2/28/05		Air Line	(Electric Mea	suring Lin	e Steel Tape		
Static Water Level (A): <u>215</u> Feet	Below Land Surface	Other (specify	/):					
Pumping Water Level	(B): 262 Feet	Below Land Surface							
Drawdown [(B) - (A)]]: Fee	t Below Land Surface	For flowing w	ell, me	asured shut in	n head:	feet		
Test Pumping Rate:	822	Gallons Per Minute	Well yielded		822	GPM wi	th a drawdown of		
Duration of Pump Tes	st (minimum 4 hours):	hours	47	feet	after	24	hours of pumping		

T1 1 20 4 14	•		1 1		· · · · · · · · · · · · · · · · · · ·				
i nereby certify that th	ne above statements are	true to the best of my ki	nowledge.	_					
BANE COOK		0.700		<i>[]</i>	1, -	/nh	<i>'</i> /		
DAVE COOK	In stall as III'	0-692		<u> </u>	Juve .	101			
Print Name of Pump	Installer and License N	No. (11 applicable)			Signature	of Pump In			
						F	orm: OLIMR-SIMR-VEL i		

APR 13 2005