

State Well Report

Part 1 - Driller's Log

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)

County: Leake
Permit #: GW-16474
Driller: Donald Smith Company
Date drilling completed: 6-08

For Office Use Only:
Aquifer: _____
Well #: M-87
L. S. Elevation: _____
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.

Information on Well Owner (Landowner if borehole is not for a water well)	Well or Borehole Location
Owner Name: <u>Freeny Water Association</u>	Latitude: <u>32</u> ° ' " Longitude: <u>89</u> ° ' "
Mailing Address: <u>1411 Hwy. 35 South</u>	Method of Lat/Long (circle one): Conventional Survey, _____ USGS quad, Hand-held GPS, Survey-grade GPS _____
<u>Carthage</u> MS <u>39051</u>	<u>SW</u> ¼ <u>NW</u> ¼ Sec <u>8</u> Twn <u>10N</u> Rng <u>9E</u>
City State Zip Code	<u>NE</u> <u>SE</u>
Telephone No. (<u>601</u>) <u>267-8266</u>	Distance <u>7</u> Miles Direction <u>SE</u> of Nearest Town <u>Carthage</u>

Well / Borehole Data

Date drilling started: 2-08 Date drilling completed: 6-08 Hole depth: 1650 Hole diameter: 9 7/8

Location of the source of any surface water used for drilling: Freeny Water Supply
Method of dosing and volume of Chlorine used in drilling and development: _____

Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: _____
Name of organization running log(s): Schlumberger

Purpose of borehole (check one): Water Well Geotechnical/Geological Investigation _____ Ground Source Heat Pump _____
Seismic Survey _____ Other (describe) _____

If drilling is not related to water well construction, skip the remainder of this block

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

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

Static Water Level: 162.83 feet above or below (circle one) land surface Date measured: 5-6-08

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

Well depth: 1520 Well grouted to a depth of 1415 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 1415 feet Casing diameter: 12 inches Type of casing: Black Steel

Screen length: 100 feet Screen diameter: 8 inches Type of screen: Stainless Wire Wrap

Screen slot size: .20 inches Setting depth: From 1420 feet to 1520 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: 1320 feet. **If telescoped or more than one screen, describe on next page**

Form: OLWR-SWR-1A

RECEIVED
AUG 08 2008
BY: OLWR

Donald Smith
Company, Inc.

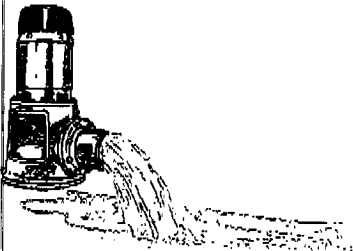
GW16474

M-87

746 East Main Street • Headland, Alabama 36345 • (334) 693-2969 • Fax (334) 693-3089

**Freeny Mississippi
Well Log
2-13-08**

0'-35'	Clay
35'-85'	Marl & Shale
85'-100'	Sand & Chalk
100'-165'	Marl
165'-166'	Rock
166'-199'	Marl, Sand & Shale
199'-200'	Rock
200'-210'	Sand, Shale & Rock
210'-248'	Sand, Rock & Shale
248'-254'	Rock & Marl
254'-280'	Marl & Rock
280'-332'	Rock, Shale & Marl
332'-373'	Sand & Shale
373'-390'	Marl & Shale
390'-425'	Marl & Sand
425'-497'	Marl & Sand
497'-517'	Marl & Sand
517'-556'	Marl & Sand
556'-587'	Marl
587'-589'	Rock
589'-592'	Marl
592'-604'	Sand & Marl
604'-680'	Marl & Sand
680'-716'	Marl, Shale & Sand
716'-830'	Marl
830'-1005'	Marl & Shale
1005'-1006'	Rock
1006'-1039'	Sand & Marl
1039'-1040'	Rock
1040'-1082'	Sand, Marl & Shale
1082'-1098'	Marl
1098'-1108	Marl & Sand
1108'-1138'	Sand & Marl
1138'-1165'	Marl & Rock
1165'-1204'	Marl & lignite
1204'-1243'	Marl, Shale & Lignite
1243'-1285'	Marl & Shale
1285'-1335'	Marl, Shale & Lignite
1335'-1389'	Sand & Marl



RECEIVED
APR 16 2008
BY: OLWR

Water Wells • Pumps & Service • Utility Construction
Drilling Wells and Pumping Water Since 1946

P.O. Box 38
Shannon, MS 38868
Phone: (662) 767-9777
Fax: (662) 767-3107

BRANCHES

126 Interstate Drive
Richland, MS 39218
Phone: (601) 932-4511
Fax: (601) 932-4751

6W16474

Freeny Mississippi
Well Log Continued

M-87

1389'-1412'	Sand, Shale & Marl
1412'-1460'	Sand
1460'-1491'	Sand
1491'-1520'	Sand
1520'-1529'	Marl
1529'-1539'	Sand & Marl
1539'-1567'	Sand & Marl
1567'-1592'	Sand & Marl
1592'-1610'	Sand & Marl
1610'-1650'	Marl

RECEIVED
AUG 08 2008
BY OLWB

Proposed Well Construction

GW 16474

Freezy Water Association

1420'

12" Casing

M-87

1320' Top of Stainless lap

100' ss lap

8" lap

1415 Bottom of Casing

1420 Top of Screen

Screen 100'

8" Screen
20 Slot

16/30 Gravel

Bronze Backwash Valve

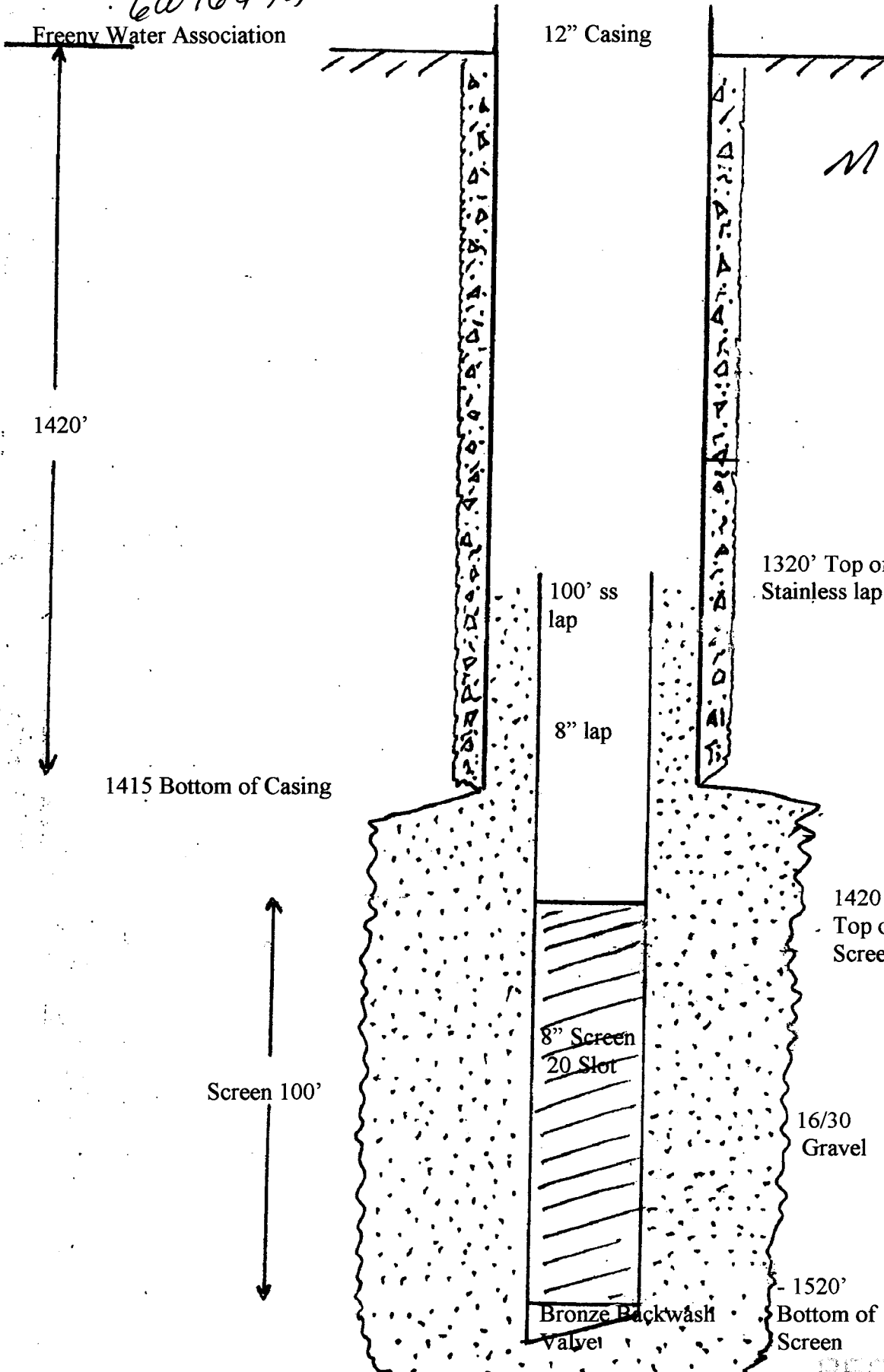
1520' Bottom of Screen

24" under ream

RECEIVED

AUG 28 2008

BY: [Signature]



STATE WELL REPORT

Part 2

Pump Installer's Completion Report
Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225
(601)961-5210
(601)961-5228 (fax)

County: Leake
 Permit #: GW-16474
 Driller: Donald Smith Co.
 Date completed: 6-08
Copy information from block on Part 1

For Office Use Only:
 Aquifer: _____
 Well #: M87
 Elevation: _____

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 Owner Information	Well Location
Owner Name: <u>Freem Water Association</u>	Latitude: <u>32°</u> Longitude: <u>89°</u>
Mailing Address: <u>1411 Hwy 35 South</u>	Method of Lat/Long (check one): Conventional Survey _____
<u>Carthage MS 39051</u> City State Zip Code	USGS quad _____ Hand-held GPS _____ Survey-grade GPS _____
Telephone No. <u>(601) 267-8266</u>	<u>SW</u> 1/4 <u>NW</u> 1/4 Sec. <u>8</u> T. <u>10N</u> R. <u>9E</u>
	Distance _____ Direction _____ Nearest Town _____
	<u>7</u> Miles <u>SE</u> of <u>Carthage</u>

Pump Type	Power Type
Circle one	Circle one
Air Lift <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/>	Diesel Engine <input type="checkbox"/> Gasoline Engine <input type="checkbox"/> Natural Gas <input type="checkbox"/>
Bucket <input type="checkbox"/> Piston <input type="checkbox"/> <u>Turbine</u> <input checked="" type="checkbox"/>	<u>Electric Motor</u> <input checked="" type="checkbox"/> Hand <input type="checkbox"/> Tractor PTO <input type="checkbox"/>
Centrifugal <input type="checkbox"/> Rotary <input type="checkbox"/> Flowing Well <input type="checkbox"/>	Windmill <input type="checkbox"/> Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>100</u>
Date Pump Installed: <u>10-08</u>	Setting Depth: <u>260</u> feet
Rated Pump Capacity: <u>650</u> Gallons Per Minute	Number of Stages: <u>12</u>

Pump Test Data	Method of Measuring Water Level
Date Well Tested: <u>12-2-08</u>	Circle one
Static Water Level (A): <u>164</u> Feet Below Land Surface	Air Line <input type="checkbox"/> <u>Electric Measuring Line</u> <input checked="" type="checkbox"/> Steel Tape <input type="checkbox"/>
Pumping Water Level (B): <u>178</u> Feet Below Land Surface	Other (specify): _____
Drawdown [(B) - (A)]: <u>14</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Test Pumping Rate: <u>665</u> Gallons Per Minute	Well yielded <u>665</u> GPM with a drawdown of
Duration of Pump Test (minimum 4 hours): <u>4</u> hours	<u>14.5</u> feet after <u>4</u> hours of pumping

This is for (circle one): New Well Replacement of Existing Pump Repair of Existing Pump

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

Ryan Herndon 0-700
 Print Name of Pump Installer and License No. (if applicable)

[Signature]
 Signature of Pump Installer