

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: Lee
Permit #: MS6016227
Driller: Layne Christensen Co.
Date drilling completed: 11/12/05

For Office Use Only:
Aquifer: _____
Well #: E-99-H-137
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>North Lee Water Association</u> Mailing Address: <u>1004 Birmingham Ridge Road</u> <u>Saltillo</u> MS <u>38866</u> City State Zip Code Telephone No. <u>(662) 869-1223</u>	Latitude: <u>34 ° 20 ' 04.7"</u> Longitude <u>88 ° 38 ' 08.0"</u> N Method of Lat/Long (circle one): <u>Conventional Survey</u> , USGS quad, Hand-held GPS, Survey-grade GPS <u>NE 1/4 NE 1/4 Sec 2</u> Twn <u>85</u> Rng <u>6E</u> Distance Direction Nearest Town <u>4</u> Miles <u>SW</u> of <u>Saltillo</u>

Well / Borehole Data

Date drilling started: 8/25/05 Date drilling completed: 11/12/05 Hole depth: 498 Hole diameter: 9 7/8"

Location of the source of any surface water used for drilling: None
Method of dosing and volume of Chlorine used in drilling and development: Added to drilling fluid / 50 gallons

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 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: 171 feet above or below (circle one) land surface Date measured: 11/12/05

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

Well depth: 436 Well grouted to a depth of 356 feet Type of grout (circle one) Neat Cement Bentonite Mix

Casing length: 356 feet Casing diameter: 10 inches Type of casing: Black Steel

Screen length: 72 feet Screen diameter: 6 inches Type of screen: 304 Stainless Steel

Screen slot size: 0.025 inches Setting depth: From 361 feet to 433 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: 299 feet. ***If telescoped or more than one screen, describe on next page***

Form: OLWR-SWR-1A

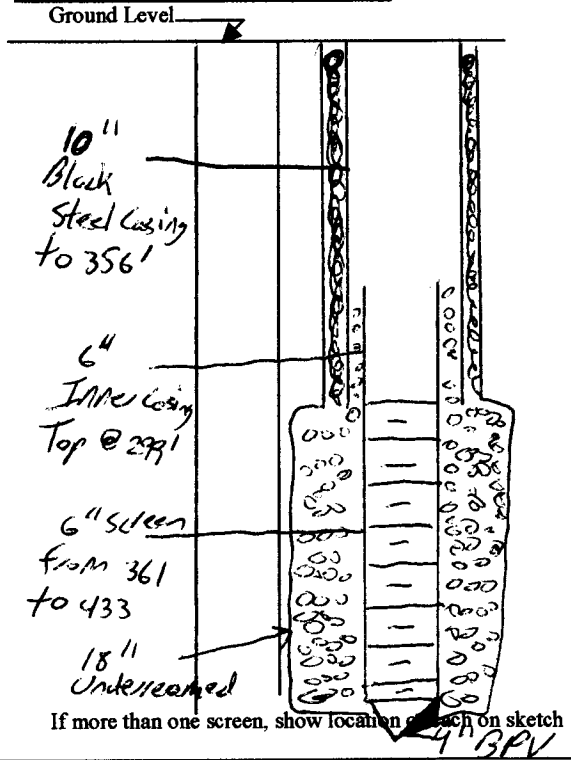
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H-137 E-99

The sketch below only required for water wells

Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

If well telescopes, show depths on sketch



Description of Formations Encountered	From (depth)	To (depth)
	Ground Level	
Red Clay	0	10
Gray Clay & Sand Streaks	10	123
Sand Stone	123	124
Gray Clay	124	164
Gray Clay & Sand Streaks	164	250
Sand & Shale Streaks	250	287
Sand & Shale Streaks	287	324
Sand & Shale	324	343
Sand & Shale Streaks	343	437
Shale	437	498

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) a north arrow.

Landowner Name: North Lee County Water Association

Form: OLWR-SWR-1A

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 laws.

Wayde Langley
 Print Name of Responsible Licensee and License No.

1/2/05
 Date

Wayde Langley
 Signature of Licensee

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MAR-28-2007 11:54AM FROM-LAYNE CENTRAL COMPANY

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STATE WELL REPORT

Part 2

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)354-6958 (fax)

For Office Use Only:

Aquifer: _____

Well #: H-137

Elevation: _____

County: Lee
 Permit #: _____
 Driller: Layne Christensen Co
 Date completed: 11/12/05
 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 Owner Information	Well Location
Owner Name: <u>North Lee Water Association</u>	Latitude: <u>34°20'4.7"N</u> Longitude: <u>88°38'8.0"W</u>
Mailing Address: <u>1004 Birmingham Ridge Road</u>	Method of Lat/Long (check one): Conventional Survey _____
<u>Saltillo</u> <u>MS</u> <u>38866</u>	USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> Survey-grade GPS _____
City State Zip Code	<u>NE</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$ Sec <u>2</u> T <u>85</u> R <u>60E</u>
Telephone No. (<u>662</u>) <u>869-1223</u>	Distance Direction Nearest Town
	<u>4</u> Miles <u>SW</u> of <u>Saltillo</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston Turbine	Electric Motor Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>60</u>
Date Pump Installed: <u>12/28/05</u>	Setting Depth: <u>270</u> feet
Rated Pump Capacity: <u>150</u> Gallons Per Minute	Number of Stages: <u>14</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>12/29/05</u>	Air Line Electric Measuring Line Staff Tape
Static Water Level (A): <u>176</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>242</u> Feet Below Land Surface	For flowing well, measured shut in head: <u>NA</u> feet
Drawdown [(B) - (A)]: <u>66</u> Feet Below Land Surface	Well yielded <u>186</u> GPM with a drawdown of
Test Pumping Rate: <u>186</u> Gallons Per Minute	<u>66</u> feet after <u>4</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>4</u> hours	

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

LAYNE LANGLEY 0193
 Print Name of Pump Installer and License No. (if applicable)

[Signature]
 Signature of Pump Installer

Form OLWR-SWR-18

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