State Well Report For Office Use Only: Part 1 Leflore County: Aquifer: Mississippi Department of Environmental Quality Office of Land and Water Resources Permit #: Well #: /-/- / Irrigation Equipment P.O. Box 10631 Driller: L. S. Elevation: Jackson, MS 39289-0631 Date drilling completed: 5-25-05(601)961-5210 E-log #: (601)354-6938 (fax) State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well. Well Location Well Owner Information Latitude: 33, 46, 19.5 Longitude: 90, 23, 2.8 Anthony Zachary Owner Name Method of Lat/Long (circle one): Conventional Survey, Mailing Address: 650 Paschal St. USGS quad, Hand-held GPS, Survey-grade GPS NW SE Sec 15 Twn 22N Rng Holcomb MS 38940 Nearest Town Direction Distance State Zip Code 6 Miles West of Minter City 662-227-1602 Telephone No. (Well Data Other: Purpose of Well (circle one) Home Industrial Public Supply (Irrigation) Fish Culture Date well drilling completed: 5-25-05 JUN 17 5-25-05 Date well drilling started: ____ If flowing, method of flow regulation: Valve _____ Other (describe) _____ Static Water Level: 32 / feet above or below (circle one) land surface Date measured: Method of Measurement (circle one) (steel tape electric tape air line other: 10 <u>117'</u> Well grouted to a depth of ___ Hole depth: 117' Well depth: Mix Cement Bentonite Type of grout (circle one): Type of casing: PVC Sch. 40 16 Casing diameter: inches Casing length: 77 feet Type of screen: PVC Sch. 40 16 inches Screen diameter: feet Screen length: _feet_to____117 Setting depth: From 78 . 050 inches Screen slot size: Underreamed Telescoped Open hole Natural Development Type of completion (circle all applicable): Gravel packed Other (describe): _ feet. If telescoped or more than one screen, describe on back of page Top of lap pipe or reduction in casing: Logs run (circle all applicable): (No log run Electric Gamma Ray Density Sonic Neutron Other:

Owner contracted with Peacock Pump & Repair of Cleveland, MS Peacock Pump & Repair will install pump.

Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

0695

I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi

Signature of Water Well Contractor

Name of organization running log(s):

Patrick M. Chism

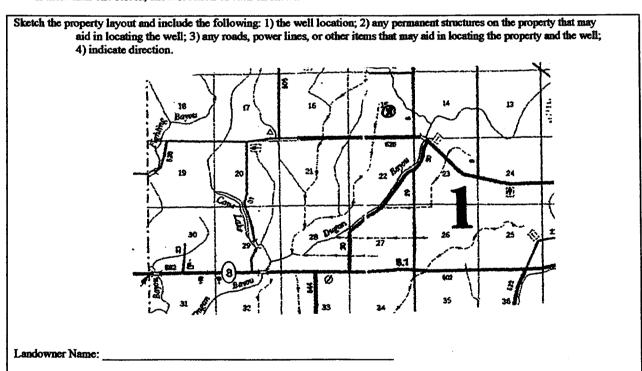
Print Name of Water Well Contractor and License No.

Irrigation Equipment Inc.

Ground Level

Description of Formations Encountered	From	To
Brown Sand	0	15
lClav	16	35
Fine Sand	36	
Fine Sand Coarse Sand/gravel	66	117
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If more than one screen, show location of each on sketch



Fatreb M Chun Signature of Water Well Contractor

STATE WELL REPORT

County: Leflore Pump In Mississippi D Office Driller: ______ Ja

Date completed:

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)354-6938 (fax)

For Office Use Only:		
Aquifer:		
Well #: A-123		
Elevation:		

This report should be prepared by the pump installer in det installation of pump.	-	
Well Owner Information	Well Location	
Owner Name: Anthony Zachary	Latitude: Longitude:	
Mailing Address: 650 Paschal St.	Method of Lat/Long (circle one): Conventional Survey,	
	USGS quad, Hand-held GPS, Survey-grade GPS	
Holcomb MS 38940 City State Zip Code	NW 1/2 SE 1/2 Sec 15 Twn 22N Rng (20)	
•	NE Distance Direction Nearest Town	
Telephone No. (62) 455 - 4753	6 Miles West of Minter City	
Pum p Type Circle one	Power Type Circle one	
,	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: 604P	
Date Pump Installed: 5-25-05	Setting Depth: 70 feet	
Rated Pump Capacity: 2800 Gallons Per Minute	Number of Stages:	
Pump Test Data Method of Measuring Water Level		
-	Circle one	
Date Well Tested:	Air Line Electric Measuring Line Steel Tape	
Static Water Level (A): 32 Feet Below Land Surface	Other (specify):	
Pumping Water Level (B):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 yieldedGPM with a drawdown of	
Duration of Pump Test (minimum 4 hours):hours	feet afterhours of pumping	
I HEREBY CERTIFY that the above statements are true to the best of my knowledge. Peacock's Pump A Peacock Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer		