County: Leflor	'e		
Permit#: 6W4\322 Irrigation Equipment			
Date drilling completed:	9-11-06		

State Well Report

Part 1

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:	
L. S. Elevation:	
E-log #:	

Well Owner Information	Well Location
Owner Name Carver Company	Latitude: 33 43 3.5.3N Longitude: 90 .26 40.8
Mailing Address: 2 Leflore County Road 33	Method of Lat/Long (circle one): Conventional Survey,
	USGS quad, Hand-held GPS, Survey-grade GPS
Pulovilla MG 20771	NE 14 SW 14 Sec 31 Twn 22N Rng 2W
Ruleville, MS 38771 City State Zip Code 662-756-2529	Distance Direction Nearest Town
Telephone No. ()	9 Miles West of Minter City
Well	Data
Purpose of Well (circle one) Home Industrial Public Supply	
Date well drilling started: 9-11-06 Date	
If flowing, method of flow regulation: Valve Other (describe)
Static Water Level: 46 feet above or below (circle one)	land surface Date measured: 9-13-06
Method of Measurement (circle one) steel tape electric tape	e air line other:
Hole depth: 126 Well depth: 126	Well grouted to a depth offeet
Type of grout (circle one): Cement Bentonite Mix	
Casing length:86feet Casing diameter:16	inches Type of casing:PVC Sch. 40
Screen length: 40 feet Screen diameter: 16	inches Type of screen: PVC Sch. 40
Screen slot size: inches Setting depth: From _	84feet to123feet
Type of completion (circle all applicable): Gravel packed Under	erreamed Telescoped Open hole Natural Development
Other (describe):	
Top of lap pipe or reduction in casing:feet. If to	elescoped or more than one screen, describe on back of page
Logs run (circle all applicable): No log run Electric Gamma Ray	y Density Sonic Neutron Other:
Name of organization running log(s):	
I certify that the well was drilled, constructed, and completed in	accordance with all applicable requirements of the Mississippi
Department of Environmental Quality and/or the Mississippi De	
Irrigation Equipment Inc.	
Patrick M. Chism 0695	Signature of Water Well Contractor
	1 constant

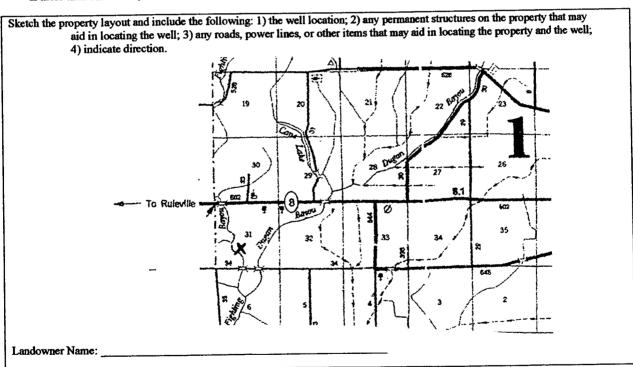
BY: OLWR

If well telescopes please sketch below and show depths.

Ground Level

Description of Formations Encountered	From	To
Clay	0	35
Fine Sand	36	41
Fine Sand/gravel Med. Sand/gravel	42	49
Med. Sand/gravel	50	123
Fine Sand	124	126
	<u> </u>	
	 	\vdash
	 	\vdash
	 	\vdash
	 	1
	 	
		├─┤
		\vdash
	1	1
	 	
	 	\vdash
	1	†
	1	
	1	-

If more than one screen, show location of each on sketch



Signature of Water Well Contractor

STATE WELL REPORT

Part 2

Leflore County: Pump Installer's Completion Report
Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 10631 Permit#: Irrigation Equipment

For Office Use Only:	
Aquifer:	
Well#:	-154
Elevation:	

Date completed: 9-11-06 Copy information from block on Part 1	Jackson, MS 39289-0631 (601)961-5210 (601)354-6938 (fax) Well #:
report must be attached and both parts filed with	icensed water well contractor or a licensed pump installer. A copy of Part 1 of the h the Department at the above address within 30 days of well completion.
Well Owner Information	Well Location
	Latitude:Longitude:
2 Leflore County Road Mailing Address:	Method of LawLong (check one). Conventional Survey,
	USGS quad, Hand-held GPS, Survey-grade GPS
Ruleville, MS	
City State 662-756-2529	Zip Code Distance Direction Nearest Town
Telephone No. ()	9 Miles West of Minter City
Pump Type Circle one	Power Type Circle one
Bucket Piston Turk	Electric Motor Hand Tractor PTO
Centrifugal Rotary Flo	wing Well Windmill Other (specify):
Other (specify):	Horse Power Rating of Motor: 60
Date Pump Installed: 9-13-06	Setting Depth: 70 feet
Rated Pump Capacity: 2300 Galle	ons Per Minute Number of Stages:2
Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested:	
Static Water Level (A):Feet Below	W Land Surface Air Line Electric Measuring Line Steel Tape Other (specify):
Pumping Water Level (B):Feet Below	/ Land Surface
Drawdown [(B) - (A)]:Feet Below	w Land Surface For flowing well, measured shut in head:feet
Test Pumping Rate:Galle	ons Per Minute Well yieldedGPM with a drawdown of
Duration of Pump Test (minimum 4 hours):	hoursfeet afterhours of pumping

7	
I HEREBY CERTIFY that the above statements are true to the best	t of my kylow)edge.
Patrick M. Chism 0695	Signature of Pump Installer
Print Name of Pump Installer and License No. (if applicable)	CINIMATO OF Y MITTO STANDARD OF
	Form OLVR-SWR-1B