County: LEFLORE _____

Permit #: _____

Driller: MS OFFICE OF GEOLOGY

Date drilling completed: 6/30/16

STATE WELL REPORT
Part 1
Driller's Log

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225-2309
(601)961-5210
(601)360-0535 (fax)

For Office Use Only:

Well #: A184

Aquifer: _____

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.

Well Owner Information (*Landowner if borehole is not for a water well*)	Well or Borehole Location
Owner Name: Delta Blues Rice	Latitude: 33 44'50" Longitude: 90 24'04" 4993 3.73
Mailing Address: 3731 Highway 8 East	Method of Lat/Long (*check one*): Conventional Survey,
	USGS quad , [Hand-held GPS] , Survey-grade GPS
City: RULEVILLE State MS Zip Code 38771	SE/4,NE/4 Sec 28 T 22N R 2W
Telephone No. (662) 618-2060	____5____Miles _____E_____ of RULEVILLE (*Distance*) (*Direction*) (*Nearest Town*)
[MONITOR WELL #4]	

Well / Borehole Data

Date drilling started: 5/10/16 Date drilling completed: 6/30/16 Hole depth: 95' Hole diameter: 7.0"

Location of the source of any surface water used for drilling: LAKE ON SITE

Method of dosing and volume of Chlorine used in drilling and development: 1 GAL BLEACH TO 1000 GALLONS WATER

Logs run (*circle all applicable*): [No log run] Electric Gamma Ray Density Sonic Neutron Other:

Name of organization running log(s):

Purpose of borehole (*circle 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 (*circle all applicable*): Home Industrial Public Supply Irrigation Fish Culture

Other (*describe*): MONITOR WELL #2 _____

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

Static Water Level: _____feet [above or below] land surface (*circle one*) Date measured: _____

Method of measurement (*circle one*): Steel tape Electric tape Air line Other (*describe*): _____

Well depth: 95 feet Well grouted to a depth of: 10 feet Type of grout (*circle one*): Neat Cement [Bentonite] Mix

Casing length: 75_____feet Casing diameter: 4_____inches Type of casing: PVC_____

Screen length: 20 _____feet Screen diameter: 4 _____inches Type of screen: PVC _____

Screen slot size: .012_____inches Setting depth: From 75_____feet to 95 _____feet

Type of completion (*circle all applicable*): [Gravel packed] Underreamed Open hole Natural Development

Other (*describe*): _____

Top of lap pipe or reduction in casing: _____feet

If telescoped or more than one screen, describe on next page

County: LEFLORE

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The sketch below only required for water wells

If well telescopes, show depths on sketch.

Ground Level

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

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

Description of Formations Encountered	From (*depth*)	To (*depth*)
CLAY	Ground level	32
CRS SAND	32	39
SAND & PEA GRAVEL	39	58
LARGE GRAVEL	58	60
CRS SAND	60	68
SAND & GRAVEL	68	95

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) north arrow

Landowner Name: **Delta Blues Rice**

I HEREBY 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.

CLETUS MAGEE 0-619 — Print Name of Responsible Licensee and License No.

6 / 30 /16 — Date

Signature of Licensee

Form: OLWR-SWR-1A (*4/13*)