State W	/ell Report			
	Driller's Log For Office Use Only:			
Mississippi Departmer	nt of Environmental Quality Aquifer:			
	nd Water Resources Box 2309 Wetl #:			
	n, MS 39225 961- 5210 L. S. Elevation:			
	1- 5228 (fax) 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 H Cross Current, LLC	Latitude: <u>33°35 '161</u> " Longitude 88°34 '994.			
Mailing Address: HUDiert Williams	Method of Lat/Long (circle one): Conventional Survey,			
4170 Jahry 4507.	USGS quad, Hand-held GPS, Survey-grade GPS			
	<u>NW45W4 Sec 15</u> Twn 175 Rng 18.W			
Columbrus Ond 39705 City State Zip Code	Distance Direction Nearest Town			
Telephone No. (62) 425-8317	H94Miles of			
Weil / Borehole Data				
Date drilling started: 1609 Date drilling completed: 17709 Hole depth: 122 Hole diameter: 4				
Location of the source of any surface water used for drilling:				
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:				
Purpose of borehole (check one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump				
Seismic SurveyOther (<i>describe</i>) 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:feet above of below (dircle one) land surface Date measured:				
Method of Measurement (circle one) steel tape electric tape air line other:				
Well depth: 122 Well grouted to a depth of 2 feet Type of grout (circle one): Neat Cement Bentonite Mix				
Casing length: 84 feet Casing diameter: 4 inches Type of casing: PVC				
Screen length: <u>37</u> feet Screen diameter: <u>2</u> inches Type of screen: <u>PVC</u>				
Screen slot size: <u>.013</u> inches Setting depth: From <u>85</u> feet to <u>122</u> 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: feet. If telescoped or more than one screen, describe on next page				
Form: OLWR-SWR-1A (04/08)				

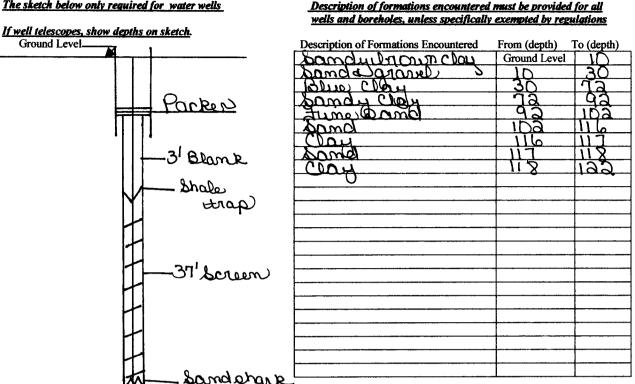
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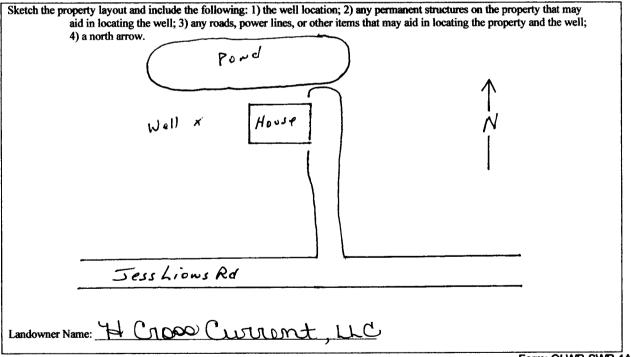
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(154

The sketch below only required for water wells



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



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. CLORDY 0-496 7 2309 Rowell & Clary e Licensee and License No. Date Signature of Licensee 1a. Donald

Print Name of Responsible Licensee and License No.

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STATE WELL REPORT			
County: Soundes Permit #: Driller: Clandy Date completed: 7 3 09 Copy information from block on Part 1 This part of the report must be completed report must be attached and both parts file Well Owner Informat Owner Name: 14. Cross Curr Mailing Address: HULERT	Para Pump Installer's Mississippi Departmen Office of Land a P.O. J Jackson (601) (601)96 by a licensed water well of a with the Department a ion	art 2 Completion Report t of Environmental Quality ind Water Resources Box 2309 , MS 39225 961-5210 1-5228 (fax) contractor or a licensed pump in t the above address within 30 da Well N. Latitude: 33.35.467 I C Method of Lat/Long (check on	tys of well completion.
	Zip Code NW 45W 4 Sec 15 Distance Direction		5_T_175_R_18.W Nearest Town
Pump Type Circle one			ver Type rcle one
Air Lift Jet	Submersible	Diesel Engine Gasoline	e Engine Natural Gas
Bucket Piston	Turbine	Electric Motor Hand	Tractor PTO
Centrifugal Rotary	Flowing Well	Windmill Other (s	specify):
Other (specify):		Horse Power Rating of Motor:	
Date Pump Installed:		Setting Depth:	_
Pump Test Data		Method of Measuring Water Level	
Date Well Tested: 1 1 9 Static Water Level (A): 9 1 Feet Pumping Water Level (B): Feet	Below Land Surface Below Land Surface	Cir Air Line Electric Meas Other (specify):	
Drawdown [(B) - (A)]:Feet	Below Land Surface	For flowing well, measured she	ut in head:feet
Test Pumping Rate:	Gallons Per Minute	Well yielded	_GPM with a drawdown of
Duration of Pump Test (minimum 4 hours):	hours	feet after	hours of pumping
I HEREBY CERTIFY that the above statements are true to the best of my knowledge. Donald B. Clardy D-496 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer			

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Signature of Pump Installer Form: OLWR-SWR-1B (04/08)

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