MAY 0 8 2013

	. STATE	WELL REPORT	BY: ON	/C
county: Sharkey	STATE WELL REPORT		For Office Use Only:	W P E
Permit # 64-47110	Driller's Log		Well #:	
Driller: Clarence MCMWM	Mississippi Department of Environmental Quality		Aguifor: A 219	
	Office of Land and Water Resources P.O. Box 2309		E-Log #:	
Date drilling completed: 3-20-[2		on, MS 39225-2309 (601)961-5210		
		1)360-0535 (fax)	,	
State Law requires that this report	be prepared by the	license holder responsible for i	he work and filed with the	
Department at the above address w	vithin 30 days of co	mpletion of drilling of the well	ur borehole.	
Woll Owner Informat (Landowner If borehple is not for	ion a water well)	Well or Borehole Location		
Owner Name: Delta City Plant	iac Co.	Intitude: 33° 02′ 57″ / Longitudo: 90° 46′ 07″ W		
Maiting Address: 3340 Hwy		Method of Lut/Long (check one): Conventional Survey		
		USGS quad, Hand-held G		
Rolling Fork MS	39159 Zip Code	NE W NW W. Sec	24 TINN ROGW	
			Delt & RECEIVE	D
Telephone No. (462) 907 - 718:		(Distunce) (Direction)	(Nearest Town)	40
	Well / 8	orehole Data	Vbs 3 p 3 0,	13
Date drilling started: 3-20-13 Date	drilling completed:	3-20-13 Hole depth: /25	Hole diamine Johns Water Mg	unt Dist
Lucation of the source of any surface v				
Method of dosing and volume of Chloric	ne used in drilling a	nd development:		
Logs run (circle all applicable): eto lug r	Electric Gamm	na Ray Density Sonic Neutro	n Other:	
Name of organization running log(s): _				
Purpose of burehole (circle one): Water	Well Geotechni	cal/Geological Investigation	Ground Source Heat Pump	
Seism	ic Survey Other ((describe)	t comment and more to after manager would be approximately approximately	
If drilling is not rel	ned to water well c	onstruction, skip the remainder	of this block	
Purpose of Well (circle nil applicable):	Home Industrial	Public Supply (rrigation)	Fish Culture	
Other (describe):	· · · · · · · · · · · · · · · · · · ·			
If a flowing well, method of flow regul	ation: Valve	Other (describe)		
Static Water Level:(eel				
Method of measurement (circle one): 9				
Well depth: <u>/25 '</u> Well grouted to a	depth off	eet Type of grout (circle one)	Neat Cemen Bentonite Mix	
Casing length: 75 feet Ci	_	• •		
Screen length: 50 feel 5				
Screen slot size: , OSO inches			/ <u>25</u> feet	
Type of completion (circle all applicable	e): Enevel packed	Underreamed Open hote	Natural Development	
Other (describe):			ı	

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

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

	i i	For Office Use	
Permit #: <u>GW-47110</u>		Well #:	<u>q</u>
The sketch below only required for water wells	Description of formation was		
f well telescopes, show depths on sketch.	Description of formations encounted by the second security of the second security of the second security of the second se	uniered must be provid Its excussed by country	ed for all
Ground Level	Description of Formations Encount		<u> </u>
7	Clay	Ground level	To (dep
	Clay & Charse Sand	21	3
:	LOWISC SENT PROGRAM	دا 25	8 2
	L.L. TAC PROEK	<u>8</u> 2	1 67
: I	Coarse Sand & SLAVE	101	108
	GRAVEL	108	120
	Pea Genel	120	125
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:			<u> </u>
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: 1			-
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		- 	
more than one screen, show location of each on sketch			
			
tch the property (many and)			
tch the property laybut and include the following: 1) the well location			
2) any normanant de manus	ald in locating the well		
2) any permanent structures on the property that may a 3) any roads, power times, or other items that may aid to north arrow	ald in locating the well in locating the property and the well		
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2) any permanent structures on the property that may a say roads, power thus, or other items that may aid to north arrow Delta City Robinson 24 Owner Name: Thomas C. Buykin	in toraling the property and the woll	MAY 0 8 2 BY: OL	
2) any permanent structures on the property that may a say roads, power thus, or other items that may aid to north arrow Delta City Robinson 24 Wenter Name: Thomas C. Buykin	17 miles	MAY 11 8 2	2018 VVF
2) any permanent structures on the property that may a 3) any roads, power times, or other items that may aid to north arrow Delta City Robinson Rd Owner Name: Thomas C. Buykin	17 miles	MAY 11 8 2	2018 VVF
2) any permanent structures on the property that may a solution and the property that may aid to the property that the well/borehole was drillerly colicable, and state laws.	17 miles	MAY 11 8 2	
2) any permanent structures on the property that may a short arrow A) north arrow Delta City Robinson 17 miles	MAY 11 8 2		



MAY 9 8 2012

	MAY 8 8 2010						
	STATE W	ELL REPORT	6 3 6 18 18 18 18 18 18 18 18 18 18 18 18 18				
County: Shankey		Part 2	OLWO II OO III				
Pormit #: GW - 47/10		er's Completion Report	For Office Use Only:				
Driller: Michael Wells	Mississippi Department of Environmental Quality Woll #						
Date completed: 4-23-13							
Copy information from block on P	Jackso	Jackson, MS 39225-2309 Aquifec					
ESE MALINITION DIOLEGIA	(601)961-5210 (601) 360-0535 (fax)						
This part of the report must be colof the report must be attached one	mpleted by a licensed water I both parts filed with the L	well contractor or a licensed pu epartment at the above address	mp installer. A copy of Part I within 30 days of well completion.				
Woll Owner Info	rmation		Location				
Owner Name: Detto City	,	Latitude: 33° 02'59" N Longitude: 90° 46' 07" W					
Mailing Address: 3340 Ha	ry 434]	e): Conventional Survey,				
Rolling Each	10 00:00		iPS, Survey-grade GPS				
Rolling Fork n	75 3 9 / 5 9 Tip Code		24 TIN ROGW				
Telephone No. (662) 907-7		2.2 Miles <u>SE</u> (Direction)	Necta City (Necrest Town)				
Pump Type (circle one)							
Submersible (urbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe):							
	mp Installed: 4-23-13 Rated Pump Capacity:						
Is This Pump (circle one): (New) Repaired Replacement							
		oe (circle one)					
Electric Diesel Gasoline Natura	al Gas Tractor PTO Win	dmill Other (describe);					
Horse Power Rating of Motor: 60 Setting Depth; 80 feet Number of Stages: 1							
Pump Test Data for Non Flowing Well							
Date Well Tested: Duration of Pump Test (minimum 4 hours): hours							
Static Water Level (A): 21			*				
	Feet Below Land Surface Test Pumping Rate: Gallons Per Minute						
Method of measurement (circle or			<u> </u>				
		a for Flowing Well	N/A				
Measured shut in head:	_feet.						
Well yieldedGPM wi	th a drawdown of	fect_after	hours of pumping				
Meter Installation							
Meter Manufacturer:		Meter Serial Number:					
Meter Model Number/Name:		Type of Meter:					
Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc);							
Installation Date: Meter installed by:							
Is This Meter (circle one): New	Repaired Replaceme	nt					
Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural walls, a list of approved meters is on the MDEQ website.							
I HEREBY CERTIFY that the above :	statements are true to the	best of my knowledge.					
Marcha Malla		40-1200	t min.				
Print Name of Pump Installer and	License No. (If auplicable)	4-25-13 Class	ture of Pump Installer				
			Form: OLWR-SWR-1B (4/13				