county: Sharker
Permit #: 6W-43639
Driller: J. NEWGME 0.773
Date drilling completed: 8.31.13

Owner Name: Delta Pine 1

Mailing Address:

(Landowner if borehole is not for a water well)

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 C	Office Use Only:
Well #:	<u> </u>
Aquifer:	· · · · · · · · · · · · · · · · · · ·
E-Log #:	

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

Well or Borehole Location

Latitude: 33'00'30 Longitude: 09046

Method of Lat/Long (check one): Conventional Survey_

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

USGS quad, Hand-held GPS, Survey-grade GPS			
Greenville MS 38704 SESWUSWSE, Sec 35 VT 14N ROGE			
City State Zip Code 3.5 Miles N.E. of ANGULLA			
Telephone No. () (Distance) (Direction) (Nearest Town)			
Well / Borehole Data			
Date drilling started: 8-31-13 Date drilling completed: 8-31-13 Hole depth: 122 Hole diameter: 24"			
Location of the source of any surface water used for drilling: DTCH			
Method of dosing and volume of Chlorine used in drilling and development: CHLORINE TABLETS			
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):			
If a flowing well, method of flow regulation: Valve Other (describe)			
Static Water Level:feet [above or below] land surface Date measured:			
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe):			
Well depth: 20 Well grouted to a depth of: 10 feet Type of grout (circle one): Neat Cement Bentonite Mix			
Casing length: 6 feet Casing diameter: 1 inches Type of casing: P.V.C.			
Screen length: 40 feet Screen diameter: 6 inches Type of screen: P.V.C.			
Screen slot size: .050 inches Setting depth: From 80 feet to 120 feet			
Type of completion (circle all applicable): Gravel packed Underreamed Open hole Natural Development 100 gravel packed			
Other (describe):			
Top of lap pipe or reduction in casing:feet			
If telescoped or more than one screen, describe on next page			

County: Sharkey		For Office Use Only:		
Permit #:		Well #: A237		
remit #.				
The sketch below only required for water wells	Description of formations enc	ountered must be provided for all wells		
	and boreholes, unless specific	ally exempted by regulations		
If well telescopes, show depths on sketch.	Description of Formations Encou			
Ground Level	TOP SOIL	Ground level		
1	CAT	10 30		
	SANO TANA	30 55		
100	MEDIUM FAIR MEDIUM CORRSE	60 90		
1 OUG	COARSE	90 120		
16"CASING	POTDU	120 122		
16 CASING				
V				
11.10				
1140uf				
16" SLAGER				
l U				
If more than one screen, show location of each on sketch				
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				
SEE MAR				
•				
		•		
Landowner Name:				
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.				
Tout & Lumes A.772	3.21.13 /ld	Lbur -		
Print Name of Responsible Licensee and License No.	Date	Signature of Licensee		
Time hame of hesponsible dicensee and dicense no.		Form: OLWR-SWR-1A (4/1		

STATE WELL REPORT

Part 2 mp Installer's Com

Permit #: <u>6W - 147639</u>

Driller: <u>J. Newlone</u> 0773

Date completed: <u>8-31-13</u>

Copy information from block on Part 1

Pump Installer's Completion Report
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 #: ______A 3 7

Aquifer: _____

	well contractor or a licensed pump installer. A copy of Part 1 epartment at the above address within 30 days of well completion.				
Well Owner Information	Well Location				
Owner Name: Delta Pine Land MGTLLC	Latitude: <u>33 00 30</u> Longitude: <u>90 46 56</u>				
Mailing Address: P.O. Box 5669	Method of Lat/Long (check one): Conventional Survey,				
City State Zip Code Telephone No. ()	USGS quad, Hand-held GPS \(\sum_, \) Survey-grade GPS				
Pump Typ	pe (circle one)				
	·				
Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe):					
Is This Pump (circle one): New Repaired Replacement					
Power Type (circle one)					
Electric Dieser Gasoline Natural Gas Tractor PTO Windmill Other (describe):					
Horse Power Rating of Motor: 6 Off Setting Depth: 70 feet Number of Stages:					
Pump Test Data for Non Flowing Well					
Date Well Tested: hours Static Water Level (A): Feet Below Land Surface Pumping Water Level (B): Feet Below Land Surface					
Drawdown [(B) - (A)]:Feet Below Land Surface Test Pumping Rate:Gallons Per Minute					
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe):					
Measured shut in head: Well yielded GPM with a drawdown of feet after hours of pumping					
Meter Installation					
Meter Manufacturer:	Meter Serial Number:				
▼	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 Replacement					
Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, 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.					

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