	STATE	WELL REPORT			
county: Sharkey		Part 1	For Office Use Only:		
Permit #: GUI- 46374	D	riller's Log	Well #: 3 46		
	Mississippi Departi	ment of Environmental Quality	_ ~		
Driller: Clarence Mc Mussy		nd and Water Resources	Aquifer:		
Date drilling completed: 10-30-12	1	2.O. Box 2309 on. MS 39225-2309	E-Log #:		
		601)961-5210			
	(60)	1)360-0535 (fax)			
State Law requires that this report Department at the above address w	be prep ared by the vithin 30 days of co	license holder responsible for t npletion of drilling of the well o	he work and filed with the or borehole.		
Well Owner Information Well #4 (Landowner if borehole is not for a water well) Owner Name: UWB, VNS, LCC		Well or Borehole Location			
		Latitude: 33 ⁰ 04 '55" N Longitude: <u>90° 41' 15" い</u>			
Mailing Address: 4424 Carolina 14wy		Method of Lat/Long (check one): Conventional Survey,			
	•	USGS quad, Hand-held G	PS, Survey-grade GPS		
Denmaak 30		Sw 1/4 5w 1/4, Sec_	02 T/9N R 05 W		
City State	Zip Code	10.66 Miles W o	of Silver City		

For Office Use Only: Well #: 3 146	
Aquifer:	
E-Log #:	

(ity State Zip Code (2/4 500 1/4, Sec 0.2 T /YN R 0500)								
City State Zip Code 10.66 Miles W of Silver City								
Telephone No. (ala2) 347-8090 (Distance) (Direction) (Nearest Town)								
Wall / Dan La La Dan								
Well / Borehole Data								
Date drilling started: 10-30-12 Date drilling completed: 10-30-12 Hole depth: 127 Hole diameter: 26"								
Location of the source of any surface water used for drilling: Ditch 1/2 mile AWAY								
Method of dosing and volume of Chlorine used in drilling and development:								
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 rigation Fish Culture								
•								
Other (describe):								
If a flowing well, method of flow regulation: Valve Other (describe)								
Static Water Level: 19 feet [above or below] land surface Date measured: 5-20-13 (circle one)								
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe):								
Well depth: 127' Well grouted to a depth of: 10 feet Type of grout (circle one): Meat Cement Bentonite Mix								
Casing length: 72 feet Casing diameter: 16 inches Type of casing: PVC								
Screen length: 55 feet Screen diameter: 16 inches Type of screen: PVC								
Screen slot size: .050 inches Setting depth: From 72 feet to 127 feet								
Type of completion (circle all applicable): Gravet 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								

Blyle

County:	For Office Use Only:			
	Well #:			
The sketch below only required for water wells	Description of formations encountere	d must be provid		
If well telescopes, show depths on sketch.	and boreholes, uniess specifically exe	npted by regulat	ions	
Ground Level	Description of Formations Encountered	From (depth)	To (depth)	
	C/Ay	Ground level	8	
	Medium/Coarse Sand & pouges	el 8	56	
	Medium Sand Fine Sand	56	61	
	Medium Sand ! pea gravel	61	64	
	Medium/Coarse Sand : pea grave	64	67	
	Medium/Course Sand ? Dea		71	
	genel & clay	71		
	Medium (base Sand peagrave	78	78	
	Median/Course Sand & skavel	87	97 93	
	Medium and 5 General	93	98	
	Coalse Sund & pea gravel	58	116	
	Medium Sand	116	119	
	Medium/Coarse Sund & glave	119	127	
		 		
		 		
more than one screen should be		 		
more than one screen, show location of each on sketch		<u> </u>		
etch the property layout and include the following: 1) the well location 2) any permanent structures on the property that may a id if the property that may aid if the property that may are property tha		you 2 d.	Y	
Ferry Rd	KROIGH	HL	CEIVE	
reny Kal	/5	. J.	20 13 9 1 N I	
ndowner Name: Terry Orlicek			Y: OLW	
EREBY CERTIFY that the well/borehole was drilled, juirements of the Mississippi Department of Environi pplicable, and state laws.	constructed, and completed in accordance mental Quality and the Mississippi Departr	with all application	able egulations,	
Mayton Mi-lee 0-703 on Name of Responsible Licensee and License No.	6-12-13 Clayton	mill	-	
	Date Signature	of Licensee		
		Form: OLWR-S	WR-1A (4/13)	

STATE WELL REPORT

County: Sharkey

Permit #: GW-46374

Copy information from block on Part 1

Date completed:

Part 2

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 #:				
Aquifer:				

This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part 1 of the report must be attached and both parts filed with the Department at the above address within 30 days of well completion. Well Location Well Owner Information Latitude: 33° 4'55.16" Longitude: 90° 41' 06.51" W Owner Name: JWB MS LLC Method of Lat/Long (check one): Conventional Survey___ USGS quad_____, Hand-held GPS____, Survey-grade GPS__ SW 14 SW 14. Sec 02 T /4N R 05W Jenmark (Distance) Miles ω of Silver (144) (Nearest Town Telephone No. (662) 347-8090 Pump Type (circle one) Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe): Rated Pump Capacity: ______Gallons Per Minute Date Pump Installed: 5-20-13 Is This Pump (circle one): (New) Repaired Replacement Power Type (circle one) Electric) Diesel Gasoline Natural Gas Tractor PTO Windmill Other (describe): SO feet Number of Stages: _ Setting Depth: ___ Horse Power Rating of Motor: __ Pump Test Data for Non Flowing Well Date Well Tested: NOT TESTED Duration of Pump Test (minimum 4 hours): NA 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 Pump Test Data for Flowing Well Measured shut in head: _____feet. _GPM with a drawdown of ______ feet after _____hours of pumping Well yielded Meter Installation Meter Manufacturer: MC Kernetec Meter Serial Number: __/2-05263 Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): 5 H x GA Installation Date: 5-24-13 Meter installed by: Mid-South 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. 6-12-13 Clay to Pump have Print Name of Pump Installer and License No. (if applicable) JUN 1 9 2013