County: Sharkey
Permit #: SW-49626
Driller: Clarence McMurry
Date drilling completed: 9-15-16

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 #: C258
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 2405 A.S.
(Landowner if borehole is not for a water well)

Owner Name: JWBMS, LLC
Mailing Address:
4424 Carolina Hwy
Denmark SC 29042
City State Zip Code
Telephone No. (662) 347-8090

Well or Borehole Location

Latitude: 32° 59' 05.69" Longitude: 90° 53' 17.30"
Method of Lat/Long (*check one*): Conventional Survey ____, USGS quad ____, Hand-held GPS X, Survey-grade GPS ____
NW ¼ SE ¼, Sec 11 T 13N R 07W
5.44 Miles (Distance) North (Direction) of Rolling Fork (Nearest Town)

Well / Borehole Data

Date drilling started: 9-15-16 Date drilling completed: 9-15-16 Hole depth: 125' Hole diameter: 26"
Location of the source of any surface water used for drilling: hauled from nearby ditch
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 Irrigation Fish Culture
Other (*describe*):
If a flowing well, method of flow regulation: Valve ____ Other (*describe*)
Static Water Level: 15 feet [above or below] land surface (*circle one*) Date measured: 9-19-16
Method of measurement (*circle one*): Steel tape Electric tape Air line Other (*describe*):
Well depth: 120' Well grouted to a depth of: 10 feet Type of grout (*circle one*): Neat Cement Bentonite Mix
Casing length: 70 feet Casing diameter: 16 inches Type of casing: PVC
Screen length: 50 feet Screen diameter: 16 inches Type of screen: PVC
Screen slot size: .050 inches Setting depth: From 70 feet to 120 feet
Type of completion (*circle all applicable*): Gravel packed Underreamed Open hole Natural Development
Other (*describe*):
Top of lap pipe or reduction in casing: N/A feet

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

County: Sharkey
Permit #: GW-49626

For Office Use Only:
Well #: C258

The sketch below only required for water wells

If well telescopes, show depths on sketch.

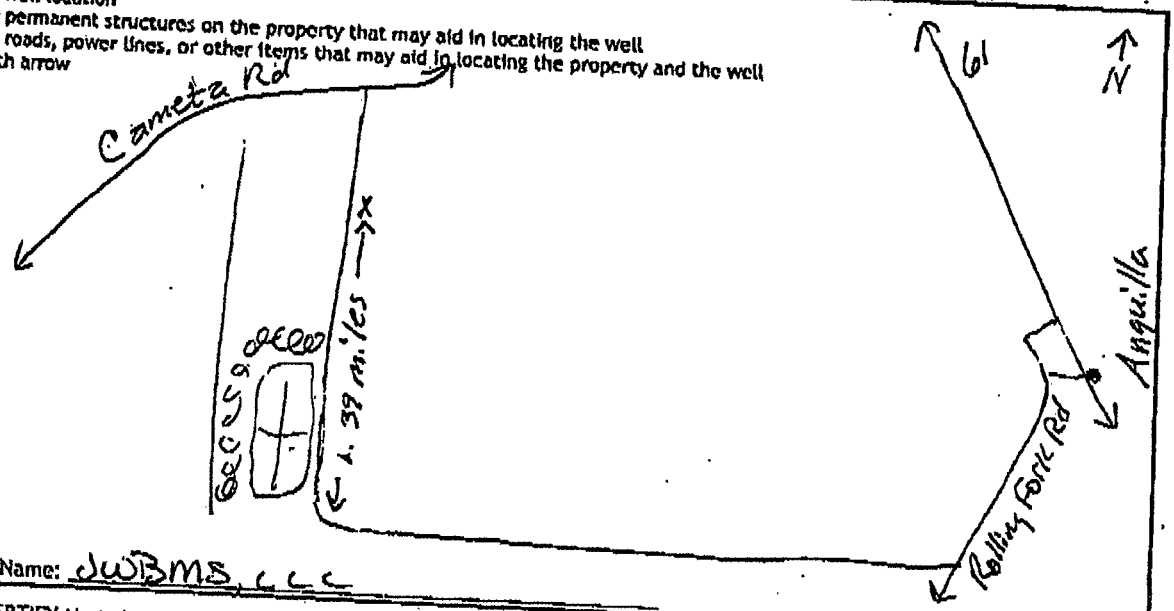
Ground Level

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) Ground level	To (depth)
Clay		15
Clay	15	20
Medium Sand	20	25
Coarse Sand w/ Pea Gravel	25	55
Coarse Sand	55	58
Coarse Sand w/ Pea Gravel	58	75
Coarse Sand	75	99
Coarse Sand w/ Pea Gravel	99	125

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: JWBMS, LLC

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.

Clayton Miller 0-703 — Print Name of Responsible Licensee and License No.
9-19-16 — Date
Clayton Miller — Signature of Licensee

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

STATE WELL REPORT

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)

County: Sharkey
Permit #: GW-49626
Driller: Scott Hood
Date completed: 9-19-16
Copy information from block on Part 1

For Office Use Only:
Well #: C258
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 Owner Information

Owner Name: JWBMS, LLC
Mailing Address: 4424 Carolina Hwy
Denmark (City) SC (State) 29042 (Zip Code)
Telephone No. (662) 347-8090

Well Location

Latitude: 32° 59' 05.69" Longitude: 90° 53' 17.30"
Method of Lat/Long (*check one*): Conventional Survey ____, USGS quad ____, Hand-held GPS ✓, Survey-grade GPS ____
NW ¼ SE ¼, Sec 11 T 13N R 07W
5.44 Miles (Distance) North (Direction) of Rolling Fork (Nearest Town)

Pump Type (*circle one*)

Submersible (Turbine) Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (*describe*): ____
Date Pump Installed: 9-19-16 Rated Pump Capacity: ____ Gallons Per Minute
Is This Pump (*circle one*): (New) Repaired Replacement

Power Type (*circle one*)

Electric Diesel Gasoline Natural Gas Tractor PTO Windmill Other (*describe*): Gear Drive
Horse Power Rating of Motor: 60 Setting Depth: 80 feet Number of Stages: 1

Pump Test Data for Non Flowing Well

Date Well Tested: NOT TESTED Duration of Pump Test (*minimum 4 hours*): N/A hours
Static Water Level (A): 15 Feet Below Land Surface Pumping Water Level (B): N/A Feet Below Land Surface
Drawdown [(B) - (A)]: N/A Feet Below Land Surface Test Pumping Rate: N/A Gallons Per Minute
Method of measurement (*circle one*): Steel tape (Electric tape) Air line Other (*describe*): ____

Pump Test Data for Flowing Well

Measured shut in head: ____ feet.
Well yielded ____ GPM with a drawdown of ____ feet after ____ hours of pumping

Meter Installation N/A

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 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.

Clayton Miller 0-703 — Print Name of Pump Installer and License No. (*If applicable*)
9-19-16 — Date
Clayton Miller — Signature of Pump Installer

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

STATE OF MISSISSIPPI

Department of Environmental Quality
Office of Land and Water Resources
P. O. Box 2309
Jackson, Mississippi 39225

#6 C258

PERMIT

TO DIVERT OR WITHDRAW FOR BENEFICIAL USE THE PUBLIC WATERS

This permit is issued to the landowner named below in accordance with the provisions of the Mississippi Water Laws, Mississippi Code Sections 51-3-1, et seq.(1972, as amended), and the regulations and standards as promulgated thereunder. Whether or not specifically named in this permit or in the applications for this permit, anyone using water from the diversion/withdrawal point described below shall do so in compliance with the provisions of this permit. Neither this permit, nor any authority conferred hereby, may be sold, conveyed, encumbered, assigned, or otherwise alienated, for any period of time or under any conditions whatsoever. This permit may not be modified, transferred or revoked without prior action by the Permit Board. Any attempts to modify, transfer or revoke this permit, or to take any other action on this permit, shall be invalid and unenforceable and may result in immediate revocation or suspension of this permit. The holder of this permit shall at all times be responsible for adherence to the terms and conditions of this permit. No agreement between the permit holder and any other party shall affect the obligations and liabilities of the permit holder. Water use under this permit is allowed only when the streamflow, lake level elevation, or static groundwater level (whichever, if any, is applicable) is above the established minimum, pursuant to Mississippi Code Section 51-3-7. Authorization is hereby granted to divert/withdraw water for the beneficial use designated herein, and for no other purpose, subject to the following terms, conditions, and limitations:

Permit Number: MS-GW-49626

Landowner Name: JWBMS LLC
Landowner Address: 4424 CAROLINA HIGHWAY
DENMARK SC 29042

Source Of Water: MISSISSIPPI RIVER VALLEY ALLUVIAL AQUIFER

Beneficial Use: IRRIGATION

Diversion/Withdrawal Location: NW 1/4 of the SE 1/4 **Section:** 11 **Township:** 13N **Range:** 07W

County: SHARKEY **Quad:** ROLLING FORK WEST

Maximum Volume: 180 Acre-Feet/Year *equivalent to* .1607 Million Gallons/Day
Maximum Rate: 2500 Gallons/Minute

Applicant Name: JWBMS LLC
Applicant Address: 4424 CAROLINA HIGHWAY
DENMARK SC 29042

Date Permit Issued: 08/30/2016
Date Permit Expires: 08/30/2021
Date Permit Modified:
Date Permit Re-issued:

This permit shall be deemed null and void if construction has not begun within one (1) year of permit issue date

SPECIAL TERMS AND CONDITIONS:

SPECIAL TERMS AND CONDITIONS 2: SEE ATTACHMENT 1, WHICH IS HEREBY DECLARED TO BE PART OF THIS PERMIT.

Gary C. Rikard, Executive Director
Mississippi Department of Environmental Quality