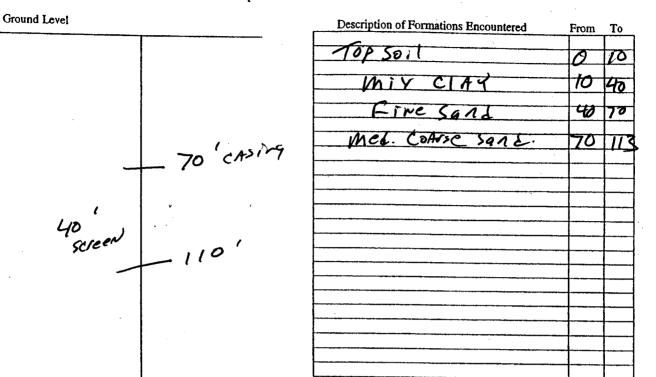
State Well Report     Part 1     Print # @W4[94:0]     Office of Land and Water Resources     P.O. Box 10631     Date:     Well Date:     Date:     Date:     Proj:     Date:     Date: <t< th=""><th>1 A A A A A A A A A A A A A A A A A A A</th><th>Fork Creek Rd.</th><th><b>—</b> · · · ·</th><th></th></t<>	1 A A A A A A A A A A A A A A A A A A A	Fork Creek Rd.	<b>—</b> · · · ·	
Courty:   Not (Figure)     Permit # GW (1/9 is 0)     Date stilling completed:   15:000000000000000000000000000000000000		State We	ell Report	
Permit # @WUI960   Mailing State Of Land and Water Resources     Differ:   Data dilling completed:   Image: Second Mail Second Mail Resources     Data dilling completed:   Image: Second Mail Second Mail Resources   Image: Second Mail Second Mail Resources     State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.   Well Owner Information     Owner Name B + R FANOMS (Second Bayton   Latitude: 32 - 51 - 52 ** Longitudeffer • 50 - 61     Mailing Address 21 3321 H Lusy 1   Method of Lat/Long (circle one): Conventional Survey.     Mailing Address 21 3321 H Lusy 1   Method of Lat/Long (circle one): Conventional Survey.     Mailing Address 21 3321 H Lusy 1   Method of Lat/Long (circle one): Conventional Survey.     Mailing Address 21 3321 H Lusy 1   Method of Lat/Long (circle one): Conventional Survey.     Mailing Address 21 321 H Lusy 1   Method of Lat/Long (circle one): Conventional Survey.     Mailing Address 21 321 H Lusy 1   Method of Lat/Long (circle one): Conventional Survey.     Mailing Address 21 321 H Lusy 1   Method of Lat/Long (circle one): Conventional Survey.     Mailing Address 21 321 H Lusy 1   Method of Lat/Long (circle one): Conventional Survey.     Mailing Address 21 321 H Lusy 1   Method of Lat/Long (circle one): Conventional Survey.     Mailing Addres	Sharkein			For Office Use Only:
Demonse (2004/21/2)				
Detter:   DATA   PO. Box 10031     Date duling completed:   H_S_OT   Jackson, MS 39289-0631     Outer the duling completed:   H_S_OT   Bits to support to be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.     Well Owaer laformation   Well Owaer laformation   Well Location     Owaer Name B+R DAMMS ( GOMP Boy Kan   Latitude: 32 - 51 - 51 - 50 - 50 - 50 - 50 - 50 - 50	Permit #: (209196)	Office of Land ar	nd Water Resources	Well # F- 40
Date ditting completed:   45-07   (601)951-5210 (601)354-6938 (fax)   E-tog #:	Driller: John Newcome			
(601)334-6938 (fax)   Pieg #	Data drilling completed: 4-5-07			L. S. Elevation:
30 days of completion of drilling of the well.   Well Owner Information     Owner Name BAR Famms ( Gome Boykin)   Latitude: 32.* 51. 52." Longitude 0.* 50.* 57.     Mailing Address 21.331 Hussy /   Method of Lat/Long (circle one): Conventional Survey.     Rulloc Fores, MS.   Method of Lat/Long (circle one): Conventional Survey.     City   State   219 Code     Telephonebre (62.)   379.199   Miles   Diamoc     Diamoc   Nearest Town   Nearest Town     Purpose of Well (circle one) Home   Industrial   Public Supply   Imigation     Parpose of Well (circle one) Home   Industrial   Public Supply   Imigation     State   21.9 Code   Miles   Diamoc   Nearest Town     State well drilling startet:   4.5 - 0.7   Date well drilling completed:   4.5 - 0.7     Date well drilling startet:   10   Well Data   State   3.9 (2.9 (2.9 (2.9 (2.9 (2.9 (2.9 (2.9 (2	Date antiting completed:			E-log #:
30 days of completion of drilling of the well.   Well Owner Information     Owner Name BAR Famms ( Gome Boykin)   Latitude: 32.* 51. 52." Longitude 0.* 50.* 57.     Mailing Address 21.331 Hussy /   Method of Lat/Long (circle one): Conventional Survey.     Rulloc Fores, MS.   Method of Lat/Long (circle one): Conventional Survey.     City   State   219 Code     Telephonebre (62.)   379.199   Miles   Diamoc     Diamoc   Nearest Town   Nearest Town     Purpose of Well (circle one) Home   Industrial   Public Supply   Imigation     Parpose of Well (circle one) Home   Industrial   Public Supply   Imigation     State   21.9 Code   Miles   Diamoc   Nearest Town     State well drilling startet:   4.5 - 0.7   Date well drilling completed:   4.5 - 0.7     Date well drilling startet:   10   Well Data   State   3.9 (2.9 (2.9 (2.9 (2.9 (2.9 (2.9 (2.9 (2				
Well Owner Name BAR Fearmans ( Geone Boykon   Latitude: 32. 51. 52." Longitude 0. 50. 51.     Mailing Address 2/133/1 Husy /   Reference Boykon   Latitude: 32. 51. 52." Longitude 0. 50. 51.     Mailing Address 2/133/1 Husy /   Reference Boykon   Method of Lat/Long (circle one): Conventional Survey.     Reference Boykon   Reference Boykon   Method of Lat/Long (circle one): Conventional Survey.     Reference Boykon   Reference Boykon   Method of Lat/Long (circle one): Conventional Survey.     Reference Boykon   State   Zip Code     Telephone (nd C2), 379-/093   Well Data     Purpose of Well (circle one) Home Industrial Public Supply (brigation)   Fish Culture Other:     Date well drilling started: 4-5-07   Date well drilling completed: 4-5-07     Date well drilling started: 4-5-07   Date well drilling completed: 4-5-07     State Water Level:   feet above or below (circle one) land surface   Date measured:     Bate well drilling started: 4-5-07   Date well drilling completed: 4-5-07   Itemative drilling completed: 4-5-07     State Water Level:   feet above or below (circle one) land surface   Date measured:   Itemative drilling completed: 4-5-07     State Water Level:   feet above or below (circle one) and surface   Date measured:   Itematine     State			driller in detail and filed w	nth the Department within
Owner Name B+R Famms ( Gong Boykin Mailing Address 2/1331 H usy / Returble C Fo 24, MS. City State Top Code Telephone (4.62.), 379-1093 Well Data Purpose of Well (circle one) Home Industrial Public Supply Inigation Fish Culture Other: Date well drilling started: 4-5-07 Date well drilling started: 4-5-07 Date well drilling completed: 4-5-07 H flowing, method of flow regulation: Valve Other (describe) State Water Level: feet above or below (circle one) land starkee Date measured: Hole depth: Must generate the measured in the measured in the measured in the feet of the measured in the starkee Difference of the starkee Difference			Wel	Location
Mailing Address: 21331 Hugy / Ralling Address: 21331 Hugy / Ralling Address: 21331 Hugy / Ralling Address: 219 Code Telephone (662) 379-1093 (iv) State Zip Code Telephone (662) 379-1093 Well Data Purpose of Well (circle one) Home Industrial Public Supply Imigation Fish Culture Other: Date well drilling started: 4-5-07 Date well drilling completed: 4-5-07 If flowing, method of flow regulation: Valve Other (describe) Static Water Level: feet above or below (circle one) land surface Date measured: Hole depth: Mell depth: Mix Casing length: feet above or below (circle one) land surface Date measured: Static Water Level: feet above or below (circle one) land surface Date measured: Method of Measurement (circle one) steel tape electric tape air line other: Hole depth: Mell depth: Mix Casing length: feet Screen diameter: Lonches Type of screen: Yec Screen slot size: inches Setting depth: From feet to feet of the Mississippi Department of Health regulations and state laws. 				
Rellinger Forker, MS.   39159     City   State   Zip Code     Telephone (40.62), 379-1093   Disaccontrol (100 - 100	Owner Name SAK Hammy (	Gene boyking	Latitude: <u>JA ° JI · SJ</u>	_" Longitude 70 ° 50 ' 80 '
Rellinger Forker, MS.   39159     City   State   Zip Code     Telephone (40.62), 379-1093   Disaccontrol (100 - 100	Mailing Address: 21331 Hu	4	Method of Lat/Long (circle o	ne): Conventional Survey,
39159   State   Zip Code     City   State   Zip Code     Digance   Digance   Digance     Miles   Economic   Of Concentration     Purpose of Well (circle one) Home   Industrial   Public Supply   Integration     Purpose of Well (circle one) Home   Industrial   Public Supply   Integration     Purpose of Well (circle one) Home   Industrial   Public Supply   Integration     Date   well drilling completed:   14-5-07   Date well drilling completed:   14-5-07     If flowing, method of flow regulation:   Valve   Other (describe)				$\sim$
City   State   Zip Code     Telephone (6.62), 37.9 - 1093   Disance   Disance   of EgneMont     Well Data     Purpose of Well (circle one) Home Industrial Public Supply (rigation) Fish Culture Other:	KOLLING I DIE			
Telephone 48. (2_). 37.9 - 10.9.3   Disance   Miles   Image: Construction of Constructin of Construction of Construction of Construction of Construction			540 14 5 14 Sec_2(	J Twn LN Rng GW
Telephone H6.(PL) 3197-1093   C   Miles   C   G   GCAMIES     Well Data     Purpose of Well (circle one) Home Industrial Public Supply (Irrigation) Fish Culture Other:     Date well drilling completed:     Jate well drilling completed:   J-S-OT     Date well drilling completed:     J-S-OT     Date well drilling completed:     J-S-OT     Date well drilling completed:     J-S-OT     Date well drilling completed:     J-S-OT     Date well drilling completed:     J-S-OT     Date well drilling completed:     J-S-OT     Date well drilling completed:     J-S-OT     Date well drilling completed:     J-S-OT     Method of Measurement (circle one) steel tape     Other (describe)     Type of grout (circle one):     Caning light:     JO     Green diameter:   JO     Joste colspan= Casing diamet			Distance Direction	Nearest Town
Well Data     Purpose of Well (circle one) Home Industrial Public Supply (Irrigation) Fish Culture Other:     Date well drilling started: $4-5-07$ Date well drilling completed: $4-5-07$ If flowing, method of flow regulation: Valve   Other (describe)     Static Water Level:	Telephone 48.42, 379-109	13	<u>G</u> Miles <u>E</u>	of Egremont
Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other:     Date well drilling started:   4-5-07     Date well drilling started:   4-5-07     If flowing, method of flow regulation: Valve   Other (describe)     Static Water Level:				J
Date well drilling started: $4-5-07$ Date well drilling completed: $4-5-07$ If flowing, method of flow regulation:   Valve   Other (describe)		Well I	Jaca	
If flowing, method of flow regulation: ValveOther (describe)	Purpose of Well (circle one) Home Ind	lustrial Public Supply (	Irrigation Fish Culture	Other:
If flowing, method of flow regulation: ValveOther (describe)	Date well drilling started: 4-5-0	7 Dates	well drilling completed: 4.	-5-07
Static Water Level:				
Method of Measurement (circle one)   steel tape   electric tape   air line   other:	If flowing, method of flow regulation: Val	lve Other (d	escribe)	
Method of Measurement (circle one)   steel tape   electric tape   air line   other:	Static Water Level:feet at	pove or below (circle one)	and surface Date measured	·
Hole depth:   113   Well depth:   110   well grouted to a depth of   10   feet     Type of grout (circle one):   Cement   Bentonite   Mix     Casing length:   70   feet   Casing diameter:   16   inches   Type of casing:   PVC     Screen length:   40   feet   Screen diameter:   16   inches   Type of screen:   PVC     Screen slot size   50   inches   Setting depth:   From   70   feet to   110   feet     Type of completion (circle all applicable):   Gravel packed   Underreamed   Telescoped   Open hole   Natural Development     Other (describe):				
Type of grout (circle one):   Cement   Bentonite   Mix     Casing length:   70   feet   Casing diameter:   16   inches   Type of casing:   PVC     Screen length:   40   feet   Screen diameter:   16   inches   Type of screen:   PVC     Screen slot size:   0.50   inches   Setting depth:   From   70   feet to   110   feet     Type of completion (circle all applicable):   Gravel packed   Underreamed   Telescoped   Open hole   Natural Development     Other (describe):	•	• •	air nne outer:	~
Casing length:	Hole depth: Well de	pth:[D	_ Well grouted to a depth of	feet
Casing length:	Type of grout (circle one): Cement	Bentonite Mix		
Screen length:   40   feet   Screen diameter:   16   inches   Type of screen:   PVC     Screen slot size:   Screen diameter:   16   feet to   110   feet     Type of completion (circle all applicable):   iravel packed   Underreamed   Telescoped   Open hole   Natural Development     Other (describe):	•			P.J.A.
Screen slot size:  inches   Setting depth: Fromfeet tofeet tofeet     Type of completion (circle all applicable):   Cravel packed   Underreamed   Telescoped   Open hole   Natural Development     Other (describe):		ing diameter:	inches Type of casing:	146
Screen slot size:  inches   Setting depth: Fromfeet tofeet tofeet     Type of completion (circle all applicable):   Cravel packed   Underreamed   Telescoped   Open hole   Natural Development     Other (describe):	Screen length: <u>40</u> feet Scre	een diameter:	inches Type of screen:	PVC
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe):	Somen slot size: ACO inches	Contraction of a Province	~ 3	
Other (describe):				
Top of lap pipe or reduction in casing:feet. If telescoped or more than one screen, describe on back of page Logs run (circle all applicable). No log run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s): I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississipp Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws. 	The second se	Gravel packed Under	rreamed Telescoped Ope	n hole Natural Development
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Logs run (circle all applicable) No log run Electric Gamma Ray Density Sonic Neutron Other:	ype of completion (circle all applicable):	Other (describe):		<b>-</b>
Name of organization running log(s): I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws. DOM Neurone O-773 Print Name of Water Well Contractor and License No. Signature of Water Well Contractor REC				-
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I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississipp Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws. <u>DOM Neurone</u> O-773 Print Name of Water Well Contractor and License No. Signature of Water Well Contractor REC	Top of lap pipe or reduction in casing:	feet. If t		reen, describe on back of page
Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.      JOHNEWOME   O-773   Johney Contractor     Print Name of Water Well Contractor and License No.   Signature of Water Well Contractor	Top of lap pipe or reduction in casing: Logs run (circle all applicable): No log ru	feet. If t		reen, describe on back of page
John Newcome O-773 Johnsone Print Name of Water Well Contractor and License No. REC	Top of lap pipe or reduction in casing: Logs run (circle all applicable). No log ru Name of organization running log(s):	feet. If t	Density Sonic Neutron	reen, describe on back of page Other:
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REC	Top of lap pipe or reduction in casing: Logs run (circle all applicable): No log ru Name of organization running log(s): I certify that the well was drilled, constr	feet. If the feet of the feet	Density Sonic Neutron	creen, describe on back of page Other: e requirements of the Mississipp
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DV·/	Top of lap pipe or reduction in casing: Logs run (circle all applicable): No log ru Name of organization running log(s): I certify that the well was drilled, constr Department of Environmental Quality a 	feet. If the feet of the feet	Density Sonic Neutron accordance with all applicabl partment of Health regulation	creen, describe on back of page Other:
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If well telescopes please sketch below and show depths.



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) indicate direction. Creck Jurk L Hur Fork Creek Loop Ro Fisn SEGREMONT Pcm Landowner Name: B+R Farms (Gene Boykin) itcMo 70 Well lorn Field Signature of Water Well Contractor

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SILONIC		LL REPORT	
Counce $Harkey$ Permit #: <u>Gul 41967</u> Driller: <u>J. NEWCome</u> Date completed: <u><math>4-5-07</math></u>	Pump Installer's Mississippi Department Office of Land a P.O. B Jackson, M (601)	art 2 Completion Report t of Environmental Quality nd Water Resources lox 10631 S 39289-0631 961-5210 4-6938 (fax)	For Office Use Only: Aquifer: Well #: Elevation:
This report should be prepared by the installation of pump.	e pump installer in detail	and filed with the Departm	ent within 30 days of the
21221 11	s by Kin	Latitud 32-51-5 Method of Lat/Long (circle	nd held CDC August and CDC
City State	Zip Code -	Distance Direction	
Pump Type Circle one		1	Power Type Circle one
Air Lift Jet	Submersible	Diesel Engine Gaso	line Engine Natural Gas
Bucket Piston	Turbine	Electric Motor Han	d Tractor PTO
Centrifugal Rotary	Flowing Well	Windmill Othe	er (specify):
Other (specify):		Horse Power Rating of Mot	tor: 60
Date Pump Installed: 4-6-0	7	Setting Depth: 60	feet
Rated Pump Capacity: 2500	_Gallons Per Minute	Number of Stages: 2 5	tay (204
Pump Test Data		Method of I	Measuring Water Level
Date Well Tested:			Circle one
Date Well Tested:		Air Line Electric M Other (specify):	Circle one feasuring Line Steel Tape
Date Well Tested:	Below Land Surface Bolow Land Surface Below Land Surface	Air Line Electric M Other (specify): For flowing well, measured	Circle one Acasuring Line Steel Tape

RECEIVED JUL 1 0 2007 BY: OLWR