

County: Simpson
 Permit #: GW16807
 Driller: Wesley Dillon
 Date drilling completed: 1/20/2012

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
 (601)961- 5210
 (601)961- 5228 (fax)

For Office Use Only:
 Aquifer: _____
 Well #: D87
 L. S. Elevation: 382'
 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.

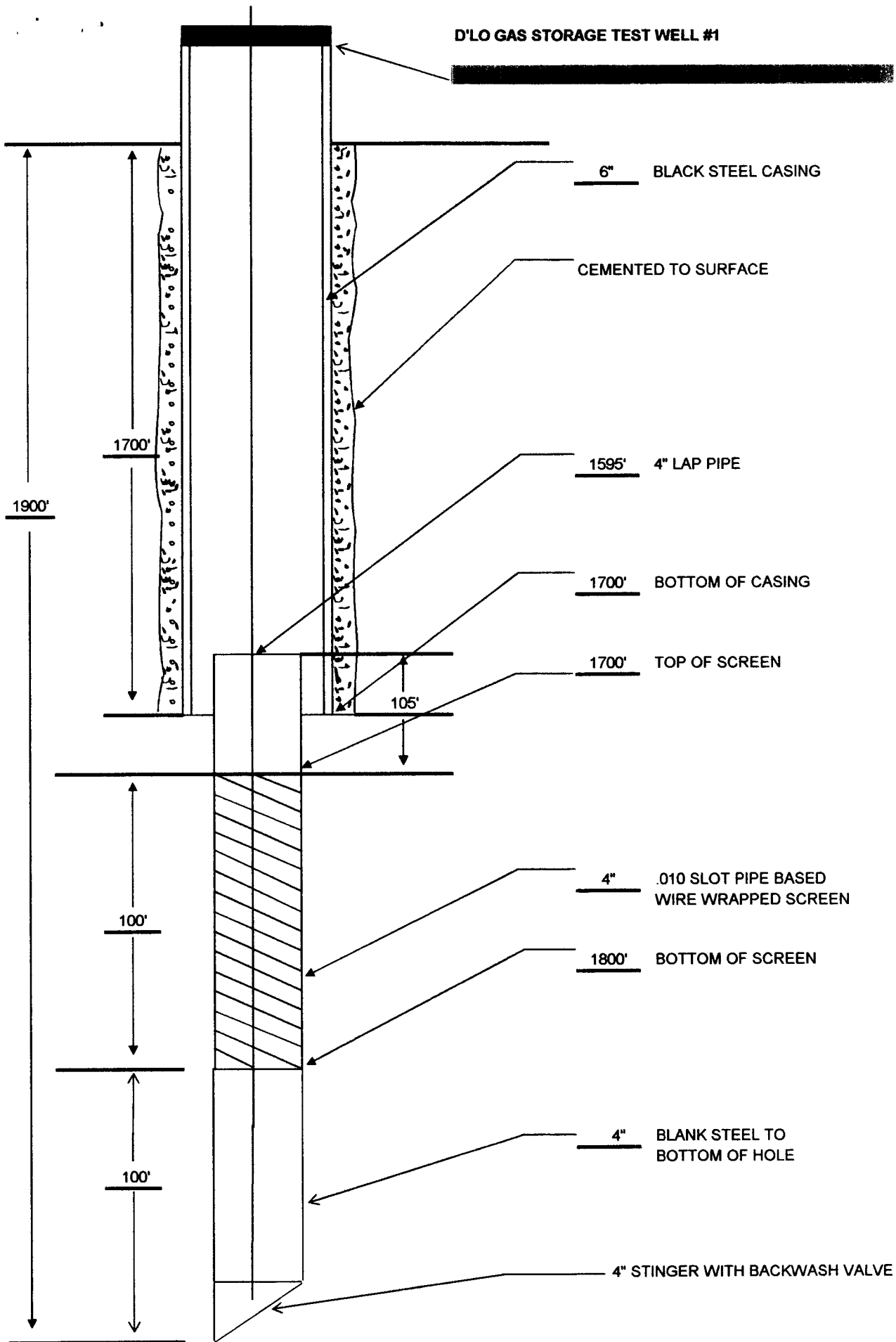
<p>Information on Well Owner <i>(Landowner if borehole is not for a water well)</i> Owner Name: <u>D'Lo Gas Storage, LLC</u> Mailing Address: <u>1002 E. St. Mary Blvd</u> <u>Lafayette LA 70503</u> City State Zip Code Telephone No. <u>337, 234-2326</u></p>	<p>Well or Borehole Location Latitude: <u>W 89°01'13</u> Longitude: <u>N 32°01'18.4</u> Method of Lat/Long (check one): Conventional Survey <input type="radio"/> <u>89-54-04 32-00-43</u> USGS quad <input type="radio"/> Hand-held GPS <input type="radio"/> Survey-grade GPS <input type="radio"/> <u>SW 1/4 NW 1/4 Sec 16 Twn 2N Rng 4E</u> Distance Direction Nearest Town <u>2</u> Miles <u>North</u> of <u>D'Lo</u></p>
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Well / Borehole Data
 Date drilling started: 11/20/2011 Date drilling completed: 1/20/2012 Hole depth: 1902' Hole diameter: 9 7/8"
 Location of the source of any surface water used for drilling: Supply Well drilled by Thompson Brothers
 Method of dosing and volume of Chlorine used in drilling and development: NONE
 Logs run (check all applicable): None Electric Gamma Ray Density Sonic Neutron Other: _____
 Name of organization running log(s): GRINER DRILLING SERVICE, INC.
 Purpose of borehole (check 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 (check one): Home Industrial Public Supply Irrigation Fish Culture Other: _____
 If a flowing well, method of flow regulation: Valve Other (describe) _____
 Static Water Level: 131.42 feet above or below land surface Date measured: 3/12/2012
 Method of Measurement (check one) steel tape electric tape air line other: _____
 Well depth: 1900' Well grouted to a depth of 1700' feet Type of grout (check one): Neat Cement Bentonite Mix
 Casing length: 1700' feet Casing diameter: 6" inches Type of casing: Black Steel
 Screen length: 100' feet Screen diameter: 4" inches Type of screen: Pipe Based, S.S. Wire Wrapped
 Screen slot size: .010 inches Setting depth: From 1700' feet to 1800' feet
 Type of completion (check all applicable): Gravel packed Underreamed Telescoped Open hole
 Natural Development Other (describe): _____
 Top of lap pipe or reduction in casing: 1595' feet. ***If telescoped or more than one screen, describe on next page***

Form: OLWR-SWR-1A (04/08)

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D'LO GAS STORAGE TEST WELL #1



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GRINER DRILLING SERVICE, INC.

Drillers Log

Owner: D'Lo Water
Well Number: Test Well No. 1

Date: 1/20/2012

Descriptions of Formations Encountered	From (depth)	To (depth)
Sand & Clay	0	132
Clay	132	162
Clay & Sand	162	290
Clay	290	350
Clay & Rock	350	380
Clay, Rock & Sand	380	442
Sand & Clay	442	472
Sand, Clay & Rock	472	504
Rock & Clay	504	536
Clay	536	598
Sand & Clay	598	660
Clay	660	690
Clay & Sand	690	754
Rock, Clay & Sand	754	786
Sand & Clay	786	880
Clay & Rock	880	910
Rock, Clay & Sand	910	942
Sand & Clay	942	974
Sand	974	1036
Clay	1036	1068
Rock & Clay	1068	1098
Sand	1098	1162
Sand & Clay	1162	1194
Sand	1194	1224
Sand & Clay	1224	1256
Clay, Sand & Rock	1256	1348
Clay & Rock	1348	1412
Clay	1412	1442
Clay & Rock	1442	1504
Sand, Clay & Rock	1504	1536
Rock & Clay	1536	1630
Sand, Clay & Rock	1630	1682
Clay & Sand	1682	1700
Sand	1700	1800
Clay & Sand	1800	1818
Sand	1818	1832
Clay & Sand	1832	1880
Clay, Rock & Sand	1880	1902

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County: SIMPSON
 Permit #: GW 16807
 Driller: _____
 Date completed: 03/16/2012
Copy information from block on Part 1

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
 (601)961-5210
 (601)961-5228 (fax)

For Office Use Only:

Aquifer: _____
 Well #: D87
 Elevation: _____

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	Well Location
Owner Name: <u>D'LO Gas Storage, LLC</u>	Latitude: <u>W 89°01'13</u> Longitude: <u>N 32°01'184</u>
Mailing Address: <u>1002 E. St. Mary Blvd</u>	Method of Lat/Long (check one): Conventional Survey <input type="radio"/>
<u>Lafayette LA 70503</u>	USGS quad <input type="radio"/> Hand-held GPS <input checked="" type="radio"/> Survey-grade GPS <input type="radio"/>
City State Zip Code	<u>SW 1/4 NW 1/4 Sec 16 T 2N R 4E</u>
Telephone No. <u>337 234-2326</u>	Distance Direction Nearest Town
	<u>2 Miles NORTH of D'LO</u>

Pump Type Check one	Power Type Check one
Air Lift <input type="radio"/> Jet <input type="radio"/> Submersible <input checked="" type="radio"/>	Diesel Engine <input checked="" type="radio"/> Gasoline Engine <input type="radio"/> Natural Gas <input type="radio"/>
Bucket <input type="radio"/> Piston <input type="radio"/> Turbine <input type="radio"/>	Electric Motor <input type="radio"/> Hand <input type="radio"/> Tractor PTO <input type="radio"/>
Centrifugal <input type="radio"/> Rotary <input type="radio"/> Flowing Well <input type="radio"/>	Windmill <input type="radio"/> Other (specify): <u>Trailer Mounted Generator</u>
Other (specify): <u>Submersible Test Pump Pulled out of well on 3/16/2012</u>	Horse Power Rating of Motor: <u>40</u>
Date Pump Installed: <u>03/7/2012</u>	Setting Depth: <u>911</u> feet
Rated Pump Capacity: <u>150</u> Gallons Per Minute	Number of Stages: <u>22</u>

Pump Test Data	Method of Measuring Water Level Check one
Date Well Tested: <u>March 12 & 13, 2012</u>	Air Line <input type="radio"/> Electric Measuring Line <input checked="" type="radio"/> Steel Tape <input type="radio"/>
Static Water Level (A): <u>131.42</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>753.65</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>622.23</u> Feet Below Land Surface	Well yielded <u>155</u> GPM with a drawdown of
Test Pumping Rate: <u>196 to 155</u> Gallons Per Minute	<u>622.23</u> feet after <u>25</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>25</u> hours	

This is for (check one): New Well Replacement of Existing Pump Repair of Existing Pump

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

Charles H. Griner 0-184 _____
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

Form: OLWR-SWR-1C (07-09)

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