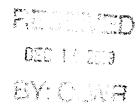
State W	ell Report	E Office Use Only				
	Oriller's Log	For Office Use Only:				
Mississippi Departmer	nt of Environmental Quality and Water Resources	Aquifer: 6 /25				
7	Box 2307	Well #:				
1	n, MS 39225 961- 5210	L. S. Elevation:				
	1- 5228 (fax)	E-log #:				
State Law requires that this report be prepared by the license holder responsible for the work and filed with the						
Department at the above address within 30 days of comp		or borehole. rehole Location				
(Landowner if borehole is not for a water well)						
Owner Name Care Cattle Co-	Latitude: 30 ° 41,58	" Longitude: \$9.04,54"				
Mailing Address: POBOX 115	Method of Lat/Long (circle on	e): Conventional Survey,				
Maining Address.	USGS quad, Hand-held	GPS, Survey-grade GPS				
1 3 3952 1	NE 1/5W 1/5 Sec 10					
City State Zip Code	Distance Direction	Nearest Town				
Telephone No. ()	MHCS	UI				
Well / Bore	hole Data					
Date drilling started: 1-27-09 Date drilling completed: 1/27	9-09 Hole depth: 90	Hole diameter: 7/2				
Location of the source of any surface water used for drilling:	OP C.					
Method of dosing and volume of Chlorine used in drilling and devel	opment:					
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:Name of organization running log(s):						
Purpose of borehole (check one): Water Well Geotechnical/Geol	ogical 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 V Industrial Public Supply Irrigation Fish Culture Other: + Form						
If a flowing well, method of flow regulation: Valve Other (describe)						
Static Water Level: 60 feet above or below (circle one) land surface Date measured:						
Method of Measurement (circle one) steel tape electric tape air line other:						
Well depth: 90 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix						
Casing length: 70 feet Casing diameter: 4 inches Type of casing: PUC 40						
Screen length: 20 feet Screen diameter: 4 inches Type of screen: PUC waysel						
Screen slot size: 10 inches Setting depth: From 70 feet to 93 feet						
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped 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						

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



The sketch below only required for water wells

If well telescopes, show depths on sketch.

Ground Level_

Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth)	To (depth)
	Ground Level	
rand	0	3
Clas	.3	22
cand	2.5	32
Clan	32	70
land	70	90

If more than one screen, show location of each on sketch

Print Name of Responsible Licensee and License No.

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) a north arrow.	property and the won,
will to the Ke	
20 H Cornate of Ke	
/20++ ed	
Abrit Creck Ked	
/ Flut Creck Fu	
	Wiggin
265	Od -
\circ	
Landowner Name: Cary Cottly C	
	Form: OLWR-SWR-1A (04/08
certify that the well/borehole was drilled, constructed, and completed in accordance with all appli	icable requirements of the

Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state

STATE WELL REPORT

Part 2

Pump Installer's Completion Report

For Office Use Only: Well #:

Date completed: // 2 3 - 05

Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 10631

Jackson, MS 39289-0631 (601)961-5210 (601)354-6938 (fax)

		red by the pump installer in by of Part 1 of this report m		•	so days of the
Well	Owner Info	ormation	-	Well Location	
Owner Name: Care Cattly Co			Latitude: Longitude:		
Mailing Address: PO	Box	. 115	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS		
L	loggi	nz M5 39527 State Zip Code	1414 Sec 10TWINT3S RIIG RIIL		S Rng RIIW
Cily	00	State Zip Code	Distance Direction Nearest Town		
Telephone No. ()			3/2 Miles 5 E of Wiggin		en
	Pump Ty Circle on		Power Type Circle one		
Air Lift	Jet	Submersible	Diesel Engine	Gasoline Engine	Natural Gas
Bucket	Piston	Turbine	Electric Motor	Hand	Tractor PTO
Centrifugal	Rotary	Flowing Well	Windmill	Other (specify):	
Other (specify):		<u> </u>	Horse Power Rating of Motor:		
Date Pump Installed:	11-23	3-09	Setting Depth: 90 feet		
Rated Pump Capacity:	35	Gallons Per Minute	Number of Stage	7	
į	'ump Test i	Data	Method of Measuring Water Level Circle one		
Date Well Tested:			AL VI		G. 1 m
Static Water Level (A):	60	Fact Below Land Surface	Air Line	Electric Measuring Line	Steel Tape
Pumping Water Level (F	80	Feet Below Land Surface	Other (specify):		
Drawdown [(B) (A)]:	20	Feet Below Land Surface	For flowing well	, measured shut in head:	feet
Test Pumping Rate:	70	Gallons Per Minute	Well yielded	70 GPM with a	drawdown of
Duration of Pump Test (minimum 4	hours):hours	s 20 feet after $1/2$ hours of pumping		
HEREBY CERTIFY th	at the above	e statements are true to the be	: et of my knowlede		

Michael R Fry Fog) 2 0408
Print Name of Pump Installer and License No. (if applicable)