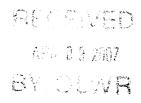
Sunflower	D	art 1	For Office Use Only:		
County.	Part 1 Mississippi Department of Environmental Quality		Aquifer:		
Permit #: 6W 4160 8	Office of Land and Water Resources		Well #: J-115		
Irrigation Equipment	P.O. Box 10631		Well #:		
3_16_07		IS 39289-0631	L. S. Elevation:		
Date drilling completed: 3-16-07		961-5210 4 (030 (free)	T. 1 #e		
	] (601)334	4-6938 (fax)	E-log #:		
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		Well Location			
Owner Name Pen-Wan Farms, LLC		Latitude: 33 35 55.7	" Longitude: 41, 21, 3W "		
550 Three Mile Lake Road Mailing Address:		Latitude: 33 35 55.7 Longitude: 41.21.3W  Method of Lat/Long (circle one): Conventional Survey,			
USGS quad, Hand-held GPS, Survey-grade GPS					
		NW 1/4 Sec 11 Twn 20N Rng 5W			
Inverness, I		D	N		
	te Zip Code	Distance Direction Nearest Town  6 Miles East of Shaw			
662-265-5 Telephone No. ( )	43 <i>/</i>	U mus EdSL	~DIIdW		
	XI/ 11 X				
	Well I	Data			
Purpose of Well (circle one) Home Industrial Public Supply Hugation Fish Culture Other:					
Date well drilling started: 3-16-07 Date well drilling completed: 3-16-07					
If flowing, method of flow regulation: Valve Other (describe)					
Static Water Level: 41' feet above or lelow (circle one) land surface Date measured: 3-23-07					
Method of Measurement (circle one) steel tape electric tape air line other:					
Hole depth: 125 Well depth: 125 Well grouted to a depth of 10 feet					
Type of grout (circle one): Cement Rentonite Mix					
Casing length: 85 feet Casi	ng diameter: 16	inches Type of casing: _]	PVC Sch.40		
Screen length: 40 feet Screen diameter: 16 inches Type of screen: PVC Sch. 40					
Screen slot size: . 050 inches	Setting depth: From	86 feet to	1 2 5 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 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 Mississippi					
Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.					
Irrigation Equipment Inc. Patrick M. Chism 0695					
TUCTION IT. CITISM	0000	I am IVI			

Print Name of Water Well Contractor and License No.

**State Well Report** 

For Office Use Only:



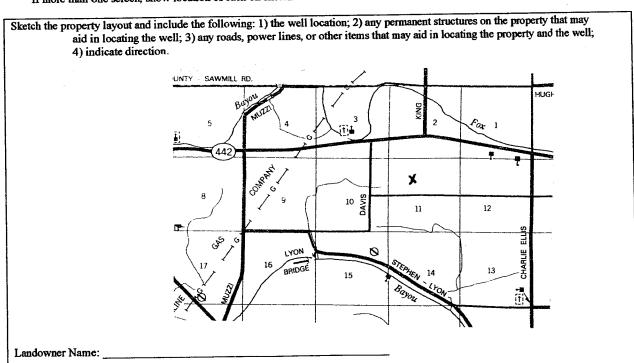
Signature of Water Well Contractor

J.

Ground Level

Desc	ription of Formations Encountered	From	To
Clav		_   _ 0	31
Fine	Sand Sand/gravel Sand/gravel	32	45
Fine	Sand/gravel	46	52
Med.	Sand/gravel	53	125
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If more than one screen, show location of each on sketch



Signature of Water Well Contractor

## STATE WELL REPORT Part 2 For Office Use Calv: County: Sunflower Pump Installer's Completion Report Mississippi Department of Environmental Quality Permit#:6W41608 Aquifer: Office of Land and Water Resources P.O. Box 10631 Well #: Jackson, MS 39289-0631 3-16-07 (601)961-5210 Date completed: (601)354-6938 (fax) This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump. Well Owner Information Well Location Owner Name: Pen-Wan Farms, LLC Latitude: Longitude: 550 Three Mile Lake Road Mailing Address: Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS Inverness MS 38753 SE 14 NW 14 Sec 11 Twn 20N Rng 5W State Zip Code Distance Direction Nearest Town 662-265-5437 Miles East of Shaw Telephone No. (\_\_\_ Pump Type **Power Type** Circle one Circle one Air Lift Jet Diesel Engine Submersible Gasoline Engino Natural Gas Bucket Piston Turbine) Electric Motor Hand Tractor PTO Centrifugal Rotary Flowing Well Windmill Other (specify): Other (specify): Horse Power Rating of Motor: Date Pump Installed: \_\_\_\_ 3-23-07 70 Setting Depth: feet 2300± 2 Rated Pump Capacity: Gallons Per Minute Number of Stages: Pump Test Data Method of Measuring Water Level Circle one Date Well Tested: Air Line Electric Measuring Line Steel Tape Static Water Level (A): \_\_\_\_\_ Feet Below Land Surface Other (specify): Pumping Water Level (B): Feet Below Land Surface Drawdown [(B)-(A)]: \_\_\_\_\_Feet Below Land Surface For flowing well, measured shut in head: feet Test Pumping Rate: Gallons Per Minute Well yielded GPM with a drawdown of Duration of Pump Test (minimum 4 hours): hours feet after hours of pumping

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

Patrick M. Chism 0695

Print Name of Pump Installer and License No. (if applicable)

Signature of Pump Installer