

JUN 05 2008 16:18 From: MID SOUTH WATER

6628431717

To: 601 360 0535

P.2/3

11-63

County: Sunflower
 Permit #: 6042540
 Driller: Eddie Hoke
 Date drilling completed: 5-20-08

State Well Report
Part 1 - Driller's Log
 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)

For Office Use Only:
 Aquifer: _____
 Well #: U-63
 I. S. Elevation: _____
 B-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.

Information on Well Owner (Landowner if borehole is not for a water well)	Well or Borehole Location
Owner Name: <u>MAKAMSON Planting Co.</u>	Latitude: <u>33° 21' 35"</u> Longitude: <u>90° 27' 53.8"</u>
Mailing Address: <u>P.O. Box R,</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>
<u>Morgan City, MS 38946</u>	USGS quad, Hand-held GPS, Survey-grade GPS
City State Zip Code	<u>1</u> <u>17</u> <u>3</u>
Telephone No. <u>(662) 254-9617</u>	Distance Direction Nearest Town
	Miles of

Well / Borehole Data

Date drilling started: 5-20-08 Date drilling completed: 5-20-08 Hole depth: 124' Hole diameter: 24"

Location of the source of any surface water used for drilling: Existing well 1500'

Method of closing and volume of Chlorine used in drilling and development: _____

Logs run (circle all applicable): Logging run Electric Gamma Ray Density Sonic Neutron Other: _____

Name of organization running logs: _____

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: _____ feet above or below (circle one) land surface Date measured: _____

Method of Measurement (circle one): steel tape electric tape air line other: _____

Well depth: 120' Well grouted to a depth of 10' feet Type of grout (circle one): Non-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 Telescoped 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*

Form OLWR-SWR-1A

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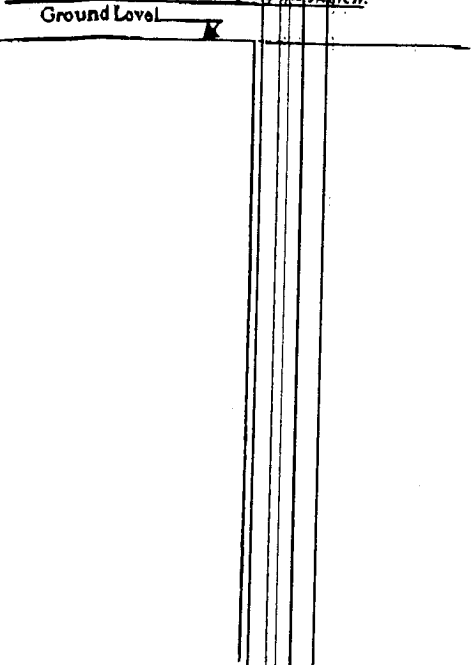
JL 4-05-2008 16:18 From: MID SOUTH WATER 6628431717 To: 601 360 0535 P.3/3

66042540

U-63

The sketch below only required for water wells

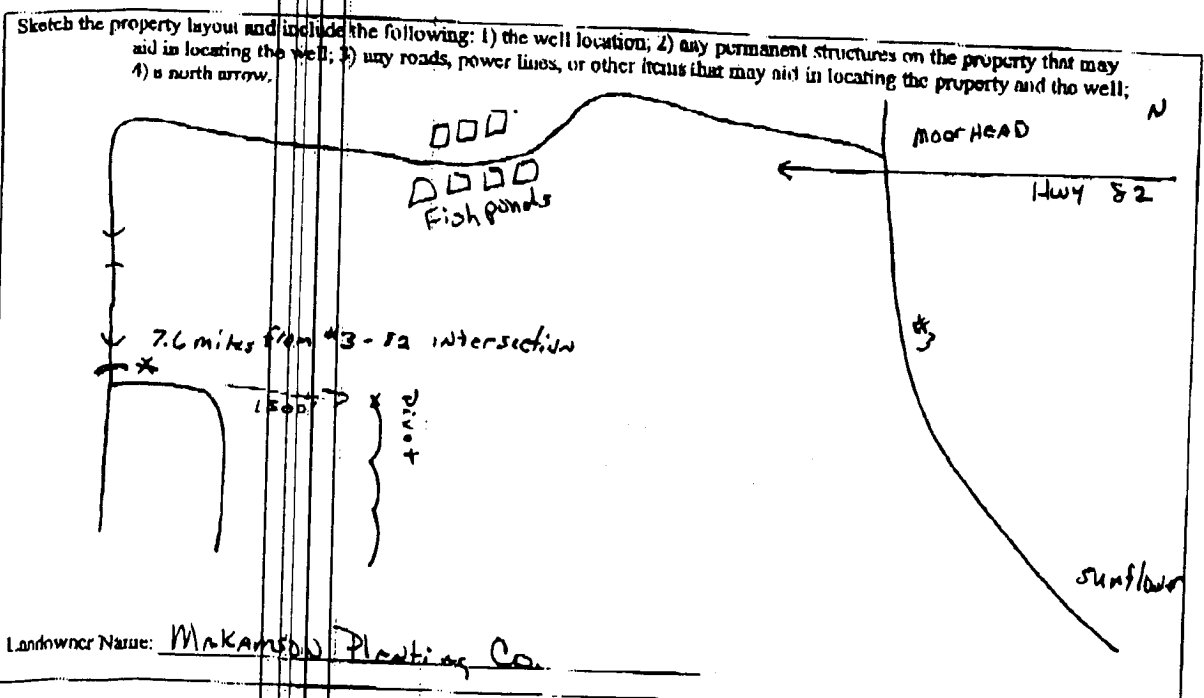
If well telescopes, show depths on sketch.



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

Description of Formations Encountered	From (depth)	To (depth)
Clay	Ground Level	14
Brown Sand	14	24
Brown Sand	24	34
Fine Sand	34	44
Medium Sand	44	54
Medium Sand	54	64
Coarse Sand	64	74
Coarse Sand & Gravel	74	84
Coarse Sand & Gravel	84	94
Coarse Sand & Gravel	94	104
Gravel	104	114
Gravel	114	124

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



I 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.

Print Name of Responsible Licensee and License No. Clayton Miller 0-703 6-05-08
 Date Signature of Licensee Clayton Miller

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