4		
County:	Tallahatc	hie
Permit #:	GW-4561	8
Driller:	Irrigation	Equipment
Date drilling completed: 03/27/2012		

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 #:	N 107		
L.S. Elevation:			
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.

Information on Well Owner (Landowner if borehole is not for a water well)			Well or Borehole Location	
Owner Name SPP			Latitude: <u>33</u> ° <u>53</u> ′ <u>33</u> ″ Longitude: <u>90</u> ° <u>21</u> ′ <u>36</u> ′	
Mailing Address: P.O.	Box 926		Method of Lat/Long (check one): Conventional Survey,	
	·····	*************	USGS quad, X Hand-held GPS, Survey-grade GPS	
		Ms 39730	$\frac{1}{3} = \frac{1}{3} = \frac{1}$	
Aber City	aeen	Ms 39730 State Zip code		
			Distance Direction Nearest Town	
Telephone No. () -		Miles of <u>Glendora</u>	
		Well /]	Borehole Data	
Date drilling started: 0.	3/27/2012 Dat	e drilling completed: 03	8/27/2012 Hole depth: 125 Hole diameter: 24"	
Location of the source of	any surface water us	sed for drilling: Surfa	ce Water	
Method of dosing and vo	•	÷		
Logs run (check all appli Name of organization ru			ma Ray Density Sonic Neutron Other:	
Purpose of borehole (che	ck one): 🛛 Water	Well Geotechnic	cal/Geological Investigation 🔲 Ground Source Heat Pump	
		nic Survey 🗌 Other	• •	
		-	construction, skip the remainder of this block	
Purpose of Well (check o	ne) 🔲 Home 🗧] Industrial 📋 Public S	upply 🛛 Irrigation 🔲 Fish Culture 🔲 Other:	
If flowing, method of flo	w regulation: Valve	Other (describe)	
Static Water Level: 34	feet above o	r below (check one)	land Surface Date measured: 04/03/2012	
Method of Measurement	(check one) 🖾 ster	el tape 🔲 electric tape	□ air line □ other:	
Well depth: 125	Well grouted to a d	epth of <u>10</u> feet	Type of grout (check one): 🗌 Neat Cement 🖾 Bentonite 🗌 Mix	
Casing length: 85	feet Cas	sing diameter: <u>16</u>	inches Type of casing: PVC	
Screen length: 40	feet Scr	een diameter: 16	inches Type of screen: PVC	
Screen slot size: .050	inches	s Setting depth: From	n <u>86</u> feet to <u>125</u> feet	
Type of completion (chee	k all applicable):	Gravel packed	Underreamed 🔲 Telescoped 📄 Open hole 📄 Natural Development	
		Other (describe):		
Top of lap pipe or reduct	ion in casing:	feet.	If telescoped or more than one screen, describe on next page	
L			Form: OLWR-SWR-1A (04/08)	

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APR 1 6 2012

BY: OLWR

N107

, 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)
Clay	Ground level	25
Brown Sand	26	35
Fine Sand	36	45
Medium Sand	46	65
Medium Sand & Gravel	66	95
Fine Sand & Rock	96	105
Course Sand & Rock	106	125
······································		

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

Sket	tch 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.

Landowner Name: SPP LLC

I certify that the well/borehole was	drilled, constructed, and completed in acc	ordance with all applicable require	ments of the
Mississippi Department of Environ	mental Quality and the Mississippi Depar	tment of Heurn regulations, if appli	cable, and state
laws. Patrick Chism 0695	04/10/2012	and	
Print Name of Responsible Licensee and License	nse No. Date	Signature of Licensee	RECEIVED

APR 1 6 2012

BY: OLWR

STATE WELL REPORT

County:	Tallahatc	hie
Permit #:	GW-456	18
Driller:	Irrigation	Equipment
Date drilli	ing completed:	03/27/2012
		n block on Pari

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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 #:	N107	
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: SPP LLC	Latitude: 33 53' 33 N Longitude: 90 21' 36 W	
Mailing Address: P.O. bOx 926	Method of Lat/Long (check one): Conventional Survey,	
	🗌 USGS quad, 🛛 Hand-heid GPS, 🔲 Survey-grade GPS	
Aberdeen Ms 39730	SW 1/4 NW 1/4 Sec 1 T 23N R 2W	
City State Zip code	Distance Direction Nearest Town	
Telephone No. () -	Miles of Glendora	
Pump Type	Power Type	
Check one	Check one	
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas	
Bucket Diston Turbine	Electric Motor Hand Tractor PTO	
Centrifugal Rotary Flowing Well	Windmill Other (specify):	
Other (specify):	Horse Power Rating of Motor: 60	
Date Pump Installed: 04/03/2012	Setting Depth: 70 feet	
Rated Pump Capacity 2300+/- Gallons Per Minut	Number of Stages: 2	
Pump Test Data Method of Measuring Water Level Check one Check one		
Date Well Tested:	Air Line Electric Measuring Line Steel Tape	
Static Water Level (A): Feet Below Land Surfac	e Other (specify):	
Pumping Water Level (B): Feet Below Land Surfac		
Drawdown [(B) - (A)]: Feet Below Land Surfac	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): hour	feet after hours of pumping	
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		
Patrick Chism 0695 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer		

Form: 01,448-5446-16 (07-09) APR 1 0 2012

BY: OLWR