	STATE WELL R	EPORT	ror	• Office Use	Only
County: Tunica	Part 1		Well #:	5 7	<u> </u>
Permit #: GW-48826	Driller's Log Mississippi Department of Envir		ality Aquifer:		
Driller: Irrigation Equipment Inc.	Office of Land and Water P.O. Box 2309	Resources	E-Log #:		
Date drilling completed: 06/10/2015	Jackson, MS 39225	-2309			
	(601) 961-5210 (601) 360-0535 (f				
State Law requires that this report	be prepared by the license hold	er responsib	le for the wo	rk and filed w	with the
Department at the above address w Well Owner Informa			<i>e well or bor</i> or Borehole L		
(Landowner if borehole is not fo		AAGU		ocation	
Owner Name: Global Ag Properties	Latitude:	34 49' 29.5	N Longitu	ıde: 90 17' 25	5.8 W
Mailing Address: P.O. Box 3009	Method of	f Lat/Long (che	eck one): 🔲	Conventional S	urvey,
] Survey-grade	
		N	e		2. 0
Chapaign IL City Stat	61826 e Zip code	<u>se</u> % se	-¼, Sec <u>18</u> ⊺ <u>0</u>	<u>10 8 70 W</u>	
Telephone No. () -	1		lortheast o		
· · · · · · · · · · · · · · · · ·	(Distan	ce)	(Direction)	(Nearest T	own)
	Well / Borehole Data	1			
Date drilling started: 06/10/2015	ate drilling completed:	Hole depth:	127'	Hole diameter:	24"
Location of the source of any surface wa	ter used for drilling: Surface Wa	ter			
,	<u> </u>				
Method of docing and volume of Chloring	used in drilling and development:	50 PPM			
Method of dosing and volume of Chlorine		50 PPM		——————————————————————————————————————	
Method of dosing and volume of Chlorine Logs run (check all applicable): 🛛 No log			nic 🗌 Neutron	☐ Other:	
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Form:	OLW	R-SWR	-1A	(4/13)
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County: Tunica Permit #: GW-48826	For Office Use O Well #: <u>B</u> <u></u>		
The sketch below only required for water wells If well telescopes, show depths on sketch	<u>Description of formations encountered mus</u> <u>and boreholes, unless specifically exempted</u>	by regulations	<u>ll wells</u> To (depth)
Ground level	Description of Formations Encountered	From (depth) Ground level	33
>	Fine Sand	34	51
	Fine Sand & Gravel	52	62
	Medium Sand & Gravel	63	127
		-	

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

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1) the well location 2) any permaner	nt structures on the property that ma wer lines, or other items that may a	ay aid in locating the well id in locating the property	and the well
			RECEIVED
			JUN 1 & 2015
			BA. OF WE
Landowner Name:	Global Ag Properties		
	that the well/borehole was drilled, c lississippi Department of Environme e laws. 0695		Form: OLWR-SWR-1A (04/08) in accordance with all applicable issippi Department of Health regulations,
	nsible Licensee and License No.	Date	Signature of Licensee
· · · · · · · · · · · · · · · · · · ·	·····		Form: OLWR-SWR-1A (4/13)

	STATE WELL REPORT	r For	Office Use Only:
County: Tunica	Part 2		B90
Permit #: GW-48826	Pump Installer's Completion Rep	port	- + /
Driller: Irrigation Equipment Inc.	Mississippi Department of Environmental 0	Quality	
Date drilling completed: 06/10/2015	_ Office of Land and Water Resources P.O. Box 2309		
Copy information from block on Part 1	Jackson, MS 39225-2309 (601) 961-5210	L	
	(601) 360-0535 (fax)		
This part of the report must be comp	leted by a licensed water well contractor or a license	ed pump installer.	A copy of Part 1
of the report must be attached and bo	th parts filed with the Department at the above add	ress within 30 day Well Locatio	rs of well completion.
Well Owner Infor			
Owner Name: Global Ag Propertie	S Latitude: 34 49' 29	.5 N Longitu	ude: 90 17' 25.8 W
Aailing Address: P.O. Box 3009	Method of Lat/Long (check one):	Conventional Survey,
• <u> </u>			
	USGS quad, 🖾 H		
Champaign IL		<u>SE</u> ¼, Sec <u>18</u> T (<u>3 S</u> R <u>10 W</u>
	itate Zip code 1 Miles	Northeast o	f Robinsonville
Felephone No. () -	(Distance)	(Direction)	(Nearest Town)
	Pump Type (check one)		
- Cubmomible 17 Turbine - Air Life	Centrifugal C Flowing Well L Jet C Piston L	Potany 🗖 Other (/	lescribe).
· · · · · · · · · · · · · · · · · · ·	Rated Pump Capacity:	2300+/-	Gallons Per Minute
s This Pump (check one): 🛛 New 🗌			
	Power Type (check one)	(acariba):	
] Electric 🛛 Diesel 🗋 Gasoline 🗋 N	Power Type (check one) atural Gas 🗍 Tractor PTO 🗌 Windmill 🗌 Other (d		
] Electric 🛛 Diesel 🗋 Gasoline 🗋 N	Power Type (check one)		Stages: _1
] Electric 🛛 Diesel 🗋 Gasoline 🗋 N	Power Type (check one) atural Gas		Stages: _1
☐ Electric ⊠ Diesel ☐ Gasoline ☐ N lorse Power Rating of Motor: <u>60</u>	Power Type (check one) atural Gas	feet Number of	
☐ Electric ⊠ Diesel ☐ Gasoline ☐ N Horse Power Rating of Motor: <u>60</u> Date Well Tested:	Power Type (check one) atural Gas Tractor PTO Windmill Other (a	feet Number of st (minimum 4 hou	urs): Hours
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