_ .	STATE WELL REPORT	For Office Use Only:
County: Tunica	Part 1	Well #: <u>F64</u>
Permit #:	Driller's Log Mississippi Department of Environmental Quality	Aquifer:
Driller: Irrigation Equipment	Office of Land and Water Resources	E-Log #:
Date drilling completed: 07/04/2014	P.O. Box 2309 Jackson, MS 39225-2309	
	└ (601) 961-5210 (601) 360-0535 (fax)	
State I an requires that this report 1	be prepared by the license holder responsible f	or the work and filed with the
	ithin 30 days of completion of drilling of the w	
Well Owner Informat	tion Well or E	Borehole Location
(Landowner if borehole is not fo	,	1
Owner Name: L.T.F. III	Latitude: <u>34 43' 20.0 N</u>	Longitude: 90 12' 52.9 W
Mailing Address: P.O. Box 424	Method of Lat/Long (check	one): 🔲 Conventional Survey,
	USGS quad, 🛛 Hand-he	eld GPS, 🔲 Survey-grade GPS
Nesbit Ms		a, Sec <u>24</u> T <u>4 Š</u> R <u>10 W</u>
City State	e Zip code	-,
Telephone No. () -		ast of Tunica
· · · · · · · · · · · · · · · · · · ·	(Distance) (Dire	ection) (Nearest Town)
	Well / Borehole Data	
Date drilling started: 07/04/2014 D	ate drilling completed: 07/04/2014 Hole depth: 1	04' Hole diameter: 24"
Location of the source of any surface wate	ter used for drilling: Surface Water	
-		
Method of dosing and volume of Chiorine	used in drilling and development. OU FFM	
·	g run 🗌 Electric 🗍 Gamma Ray 🗍 Density 🗌 Sonic	Neutron Other:
Method of dosing and volume of Chlorine Logs run (check all applicable): X No log Name of organization running log(s):		
Logs run (check all applicable): 🛛 No log Name of organization running log(s):	g run ☐ Electric ∏ Gamma Ray ☐ Density ☐ Sonic	
Logs run (check all applicable): 🛛 No log Name of organization running log(s): Purpose of borehole (check one): 🖾 Wa	a run 🗌 Electric 🗍 Gamma Ray 🗍 Density 🗌 Sonic	
Logs run (check all applicable): 🛛 No log Name of organization running log(s): Purpose of borehole (check one): 🖾 Wa	a run 🗌 Electric 🗍 Gamma Ray 🗋 Density 🗌 Sonic Vater Well 🔹 Geotechnical/Geological Investigation Geismic Survey 👘 Other (<i>describe</i>)	Ground Source Heat Pump
Logs run (check all applicable): 🛛 No log Name of organization running log(s): Purpose of borehole (check one): 🖾 Wa	a run 🗌 Electric 🗍 Gamma Ray 🗍 Density 🗌 Sonic	Ground Source Heat Pump
Logs run (check all applicable): 🛛 No log Name of organization running log(s): Purpose of borehole (check one): 🖾 Wa 🗌 S <i>If drilling is not rela</i>	a run 🗌 Electric 🗍 Gamma Ray 🗋 Density 🗌 Sonic Vater Well 🔹 Geotechnical/Geological Investigation Geismic Survey 👘 Other (<i>describe</i>)	Ground Source Heat Pump
Logs run (check all applicable):	g run Electric Gamma Ray Density Sonic later Well Geotechnical/Geological Investigation seismic Survey Other (describe) ated to water well construction, skip the remain Home Industrial Public Supply	Ground Source Heat Pump
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Logs run (check all applicable):	g run Electric Gamma Ray Density Sonic Vater Well Geotechnical/Geological Investigation Seismic Survey Other (describe) ated to water well construction, skip the remain Home Industrial Public Supply Home Industrial Other (describe) n: Valve Other (describe) meter Other (describe) Other (describe)	Ground Source Heat Pump
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Logs run (check all applicable):	g run Electric Gamma Ray Density Sonic later Well Geotechnical/Geological Investigation seismic Survey Other (describe)	a Ground Source Heat Pump ander of this block Fish Culture easured: 07/05/2014 ribe)
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County: Tunica Permit #: GW-48383		r Office Use E64	
The sketch below only required for water wells If well telescopes, show depths on sketch.	Description of formations encountered must and boreholes, unless specifically exempted	by regulations	
Ground level	Description of Formations Encountered	From (depth) Ground level	To (depth) 32
¥	Clay Fine Sand	33	44
	Fine Sand & Gravel	45	52
	Medium Sand & Gravel	53	100
		101	104
	·····		1

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

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	ut and include the following:			<u> </u>	
1) the well location 2) any permanents	structures on the property that	may aid in locating the	well		
	r lines, or other items that may				
4) a north arrow	•	0			
Landowner Name:	L.T.F. III				
				Form: OLWR-SW	5 44 (04/00)
HEREBY CERTIFY that	t the well/borehole was drilled,	constructed, and com	neted in accordance with		R-1A (04/00)
requirements of the Miss	sissippi Department of Environ	mental Quality and the	Nississippi Department o	f Health regulation:	S,
if applicable, and state la			M/		
Patrick Chism	0695	08/20/2014	1a a		
Print Name of Respons	ible Licensee and License No.	Date	V	e of Licensee Form: OLWR-SWf	P-1A (A/13)
					AUG 2 3 2014

			STATE W	ELL REPORT	F	For Off	ice Use Only:
County: Tunica				Part 2	1		264
Permit #: GW-48	383	Pu		's Completion Repo			~~ .
Driller: Irrigation		Missi		ent of Environmental Qu		or [.]	
				and Water Resources . Box 2309	Aquif	er:	
Date drilling complete Copy information			Jackson,	MS 39225-2309			
				l) 961-5210 360-0535 (fax)			
This and address			()	()	• • •		(D - ()
of the report must	port must be co be attached an	ompletea by a la d both parts file	censea water wel ed with the Depa	ll contractor or a licensed rtment at the above addres	pump instal ss within 30	ter. A coj davs of w	by of Part 1 vell completion.
	Well Owner Ir		x		Well Loca		
Owner Name: L.	T.F. 11			Latitude: 34 43' 20.0	N ion	aitudo:	90 12' 52.9 W
			1- v			gauue.	
Mailing Address:	P.O. Box 424			Method of Lat/Long (ch	eck one):	Conv	entional Survey,
				USGS quad, 🛛 Han	id-held GPS		/ev-grade GPS
Nesbit City	,,,,,,	Ms State	38651	<u>SW</u> ½ <u>N</u>	<u>W</u> ¼, Sec <u>2</u> 4	<u>4 t 4 S</u> F	र <u>10 W</u>
Telephone No.	()		Zip code	9 Miles	East	of	Tunica
Telephone No.	<u> </u>				(Direction)	_ of	(Nearest Town)
				e (check one)			
Date Pump Installe	d 07/05/201	4	F	ated Pump Capacity: 2	500+/-		Gallons Per Minut
Is This Pump (chec							Galions Fer Minu
	n oney. 23 Hen						
			Power Typ	e (check one)			
Electric Diese	el ∏ Gasoline [7 Natural Gas I	Power Typ		cribe):		
			Power Typ	Uindmill DOther (des	· · ·	of Stage	e: 1
Electric Diese			Power Typ	Uindmill DOther (des	<i>cribe):</i> et Number	of Stage	s: <u>1</u>
		0	Power Typ	Uindmill DOther (des	· · ·	of Stage	s: <u>1</u>
	g of Motor: <u>6</u>	0 Pu	Power Typ	Windmill D Other (des 70' fe	et Number		
Horse Power Rating	g of Motor: 6	0 Pu	Power Typ	Windmill D Other (des 70' fe or Non Flowing Well Duration of Pump Test (et Number	hours):	Но
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