

County: Tunica  
 Permit #: GW 40491  
 Driller: Alan Pyle Tunica  
 Date drilling completed: 6-27-05

**Part I**  
 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 Other Use Only:  
 Aquifer: \_\_\_\_\_  
 Well #: G-122  
 L. S. Elevator: \_\_\_\_\_  
 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: <u>Nolan Cannon</u>          | Latitude: _____ Longitude: _____                            |
| Mailing Address: <u>4045 WALNUT LAKE</u> | Method of Lat/Long (circle one): <u>Conventional Survey</u> |
| <u>Dumala MS 38626</u>                   | USGS quad, Hand-held GPS, Survey-grade GPS                  |
| City State Zip Code                      | <u>8 N 14 NE 14 Sec 14 Twp 5 S Rng 11 W</u>                 |
| Telephone No. <u>(601) 363-2870</u>      | Distance Direction Nearest Town                             |
|  | <u>3 Miles S E of Tunica MS</u>                             |

**Well Data**

Purpose of Well (circle one): Home Industrial Public Supply irrigation Fish Culture Other: \_\_\_\_\_

Date well drilling started: 6-27-05 Date well drilling completed: 6-27-05

If flowing, method of flow regulation: Valve \_\_\_\_\_ Other (describe): \_\_\_\_\_

Static Water Level: 18 feet above or below (circle one) land surface Date measured: 6-28-05

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

Role depth: 100 Well depth: 100 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bencrete Mix

Casing length: 60 feet Casing diameter: 16 inches Type of casing: PVC

Screen length: 40 feet Screen diameter: 16 inches Type of screen: PVC

Screen slot size: 0050 inches Setting depth: From 60 feet to 100 feet

Type of completion (circle all applicable): Gravel pack 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: VISUAL

Name of organization running logs: \_\_\_\_\_

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.

ALAN PYLE 0674 \_\_\_\_\_  
 Print Name of Water Well Contractor and License No. Signature of Water Well Contractor

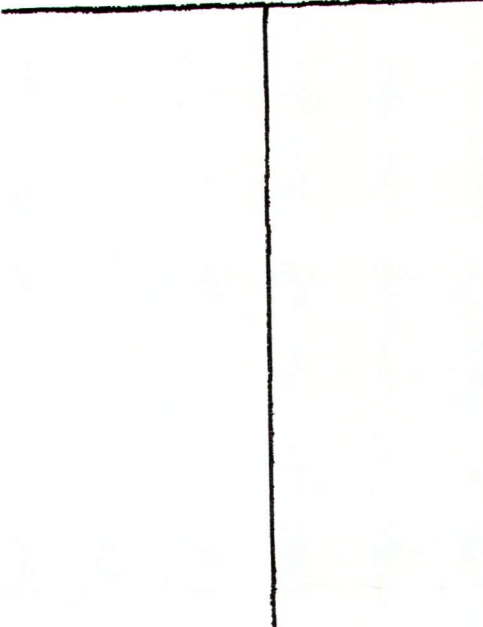
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G-122

If well telescopes please sketch below and show depths.

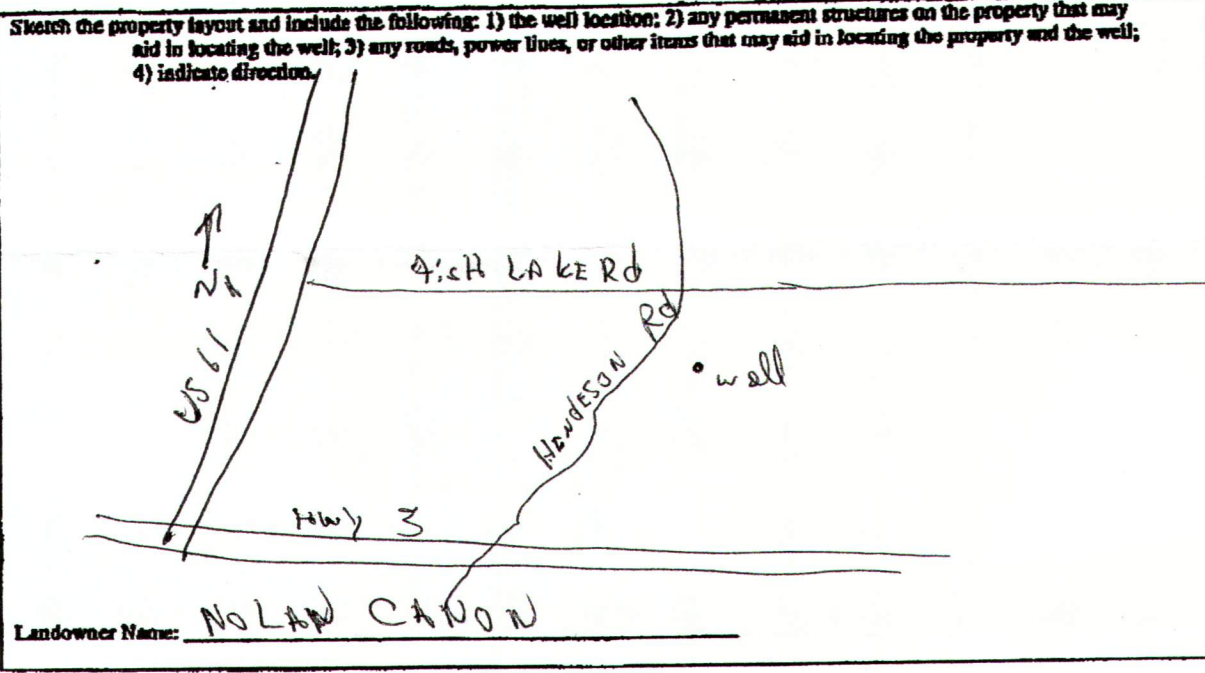
Ground Level

6W 40491



| Description of Formations Encountered | From | To  |
|---------------------------------------|------|-----|
| CLAY                                  | 0    | 40  |
| 4. NE SAND                            | 40   | 55  |
| COURSE SAND & GRAVEL                  | 55   | 100 |
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If more than one screen, show location of each on sketch



*[Signature]*  
 Signature of Water Well Contractor

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# STATE WELL REPORT

## Part 2

**Pump Installer's Completion Report**  
 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)

County: TUNICA  
 Permit #: 60W40491  
 Driller: DELTA DRILLING  
 Date completed: 6-28-05

For Office Use Only:

Aquifer: \_\_\_\_\_  
 Well #: G-122  
 Elevation: \_\_\_\_\_

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: <u>NOLAN CANON</u><br>Mailing Address: <u>4045 WALDOT LAKE RD</u><br><u>DUNDREE MS 38626</u><br><small>City State Zip Code</small><br>Telephone No. <u>(662)-363-2870</u> | Latitude: _____ Longitude: _____<br>Method of Lat/Long (circle one): <u>Conventional Survey</u> ,<br><u>USGS quad, Hand-held GPS, Survey-grade GPS</u><br><u>SW ¼ NE ¼ Sec 14 Twn 5S Rng 11W</u><br>Distance Direction Nearest Town<br><u>3 Miles SE of TUNICA</u> |

| Pump Type<br>Circle one  | Power Type<br>Circle one   |
|--|--|
| Air Lift      Jet      Submersible<br>Bucket      Piston <u>Turbine</u><br>Centrifugal      Rotary      Flowing Well<br>Other (specify): _____<br>Date Pump Installed: <u>6-28-05</u><br>Rated Pump Capacity: <u>3000</u> Gallons Per Minute | <u>Diesel Engine</u> Gasoline Engine      Natural Gas<br>Electric Motor      Hand      Tractor PTO<br>Windmill      Other (specify): _____<br>Horse Power Rating of Motor: <u>110</u><br>Setting Depth: <u>60</u> feet<br>Number of Stages: <u>1</u> |

| Pump Test Data   | Method of Measuring Water Level<br>Circle one   |
|--|---|
| Date Well Tested: _____<br>Static Water Level (A): <u>19</u> Feet Below Land Surface<br>Pumping Water Level (B): _____ Feet Below Land Surface<br>Drawdown [(B) - (A)]: _____ Feet Below Land Surface<br>Test Pumping Rate: _____ Gallons Per Minute<br>Duration of Pump Test (minimum 4 hours): _____ hours | Air Line      Electric Measuring Line <u>Steel Tape</u><br>Other (specify): _____<br>For flowing well, measured shut in head: _____ feet<br>Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping |

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

ALAN PYLE      \_\_\_\_\_  
Print Name of Pump Installer and License No. (if applicable)      Signature of Pump Installer

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