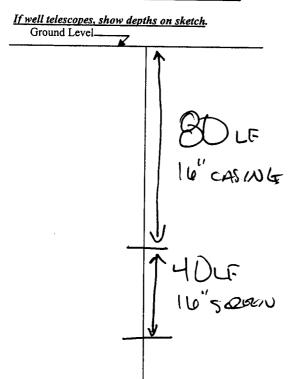
DORNBUSCH	#3			
County: $Warren Part 1 - I$ Permit #: $GW - 45545$ Driller: T. NEWCOME O.773 Data drilling appropriated 3.7.200 Part 1 - I Mississippi Departmen Office of Land a P.O. Jackson (601)	Vell or Bo Well or Bo Latitude: <u>32 • 33 , 43</u> Method of Lat/Long (circle or USGS quad, Hand-held	or borehole. orehole Location " Longitude: <u>D</u> • <u>44</u> me): Conventional Survey GPS Survey-grade GPS Twn <u>18N</u> Rng_C	<u>م</u> the	
Telephone No. ()	<u>45</u> Miles <u>N.E.</u>	Nearest Town of REDWOOD		
Method of dosing and volume of Chlorine used in drilling and devel Logs run (circle all applicable): No log run Electric Gamma Ray Name of organization running log(s): Purpose of borehole (check one): Water Well Geotechnical/Geole	Density Sonic Neutron	Other:		
Seismic Survey Other (describe If drilling is not related to water well construction	, skip the remainder of this bla	ock		5
Purpose of Well (check one): Home Industrial Public Supply If a flowing well, method of flow regulation: Valve O			-	
Static Water Level: feet above or below (circle one) 1 Method of Measurement (circle one) steel tape electric tape			-	
Well depth: <u>120</u> Well grouted to a depth of <u>10</u> feet Type Casing length: <u>80</u> feet Casing diameter: <u>316</u> Screen length: <u>40</u> feet Screen diameter: <u>16</u>	_inches Type of casing:	P.V.C.	_	
Screen slot size: inches Setting depth: From			_	
Type of completion (circle all applicable): Oravel packed Under Other (describe):	reamed Telescoped Open		ment	
Top of lap pipe or reduction in casing:feet. <u>If tel</u>	escoped or more than one scree	en, describe on next page		
		Form: OLWR-SWR-	1A (04/08	มี EIVE
			MAY	2 3 201
			BY:	OLW

11 ...

C34

The sketch below only required for water wells



Ecologiant Constant Constant of Tegunanons				
Description of Formations Encountered	From (depth)	To (depth)		
TOP SOIL	Ground Level	10		
FINESAND CLAY STRUPS FINE MOD. SAND	TD ID	35		
FINE MUD. SAND	35	50		
MED COMOSE STRIPS	50	112		
PEBBLE	IIL	120		
BOTIOM	120	124		
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Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations 11

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

Sketch 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.

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

JOHN NEWCOME 0.773	3.7.2012	1 of Dowc-e
Print Name of Responsible Licensee and License No.	Date	Signature of Licensee

	STATE WE	LL REPORT		
County: Warren	Part 2		For Office Use Only:	
Permit #: GW - 45545		Completion Report	Aquifer:	
Driller: J. Newcome 0-773	Mississippi Department of Environmental Quality Office of Land and Water Resources		Well #: <u>C34</u>	
Date completed: 3-7-2012		Box 2309 ., MS 39225	Elevation:	
	(601)	961-5210		
Copy information from block on Part 1	(601)96	1-5228 (fax)		
This part of the report must be completed l report must be attached and both parts file				
Well Owner Informati			l Location	
Owner Name: Floweree Plan	ting Company	Latitude: <u>32 33 43</u>	Longitude: 90 44 02	
Mailing Address: 3360 Flower	· · · · · · · · · · · · · · · · · · ·	Method of Lat/Long (check or	e): Conventional Survey,	
		USGS quad, Hand-held	GPS, Survey-grade GPS	
Redwood MS City State	Zip Code	SE 4 SW 4 Sec. NE NW Distance Direction 6.5 Miles N.E. or	T 18N R 05 E Red Wood	
Pump Type		Pov	wer Type	
Circle one Air Lift Jet	Submersible (c	ircle one e Engine Natural Gas	
Bucket Piston	Turbine	Electric Motor Hand	Tractor PTO	
Centrifugal Rotary	Flowing Well		specify):	
Other (specify):	_	Horse Power Rating of Motor:	<i>C</i> .	
Date Pump Installed: 419112	L	Setting Depth:O		
Rated Pump Capacity:	Gallons Per Minute	Number of Stages:		
Pump Test Data		Method of Me	asuring Water Level	
Date Well Tested:		Ci Air Line Electric Meas	rcle one suring Line Steel Tape	
Static Water Level (A):Feet I	Below Land Surface	Other (specify):		
Pumping Water Level (B):Feet B	elow Land Surface			
Drawdown [(B) – (A)]:Feet H	Below Land Surface	For flowing well, measured sh	ut in head:feet	
Test Pumping Rate:	Gallons Per Minute	Well yielded	_GPM with a drawdown of	
Duration of Pump Test (minimum 4 hours):	hours	feet after	hours of pumping	
This is for (circle one): New Well Replacement of Existing Pump Repair of Existing Pump				
I HEREBY CERTIFY that the above statemed OMPOW Print Name of Pum	e	f my knowledge. <u>Signature of Pump Ins</u>	Form: OLWR-SWR-MA(07209) 2012	
			BY: OLW	

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