

Thursday, July 28, 2005 2:33 PM

Bill Schultz 662 335.5777

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State Well Report

Part 1

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 10631
Jackson, MS 39289-0631
(601)961-5210
(601)354-6928 (fax)

For Office Use Only

Aquifer: _____
Well #: H-196
L. S. Elevation: _____
E-log #: _____

Country: Washington
Permit #: _____
Driller: Charles M. Nichols
Date drilling completed: 7-15-05

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>Aqua Farms</u>	Latitude: <u>33° 17' 03" N</u> Longitude: <u>070° 58' 34" W</u>
Mailing Address: <u>1274 WILMOT Rd</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad: <u>Hand-held GPS</u> , Survey-grade GPS
<u>Greenville MS 38701</u>	<u>1/4</u> <u>1/4</u> Sec <u>38</u> Twn <u>17N</u> Rng <u>8W</u>
City State Zip Code	Distance Direction Nearest Town
Telephone No. () _____	Miles of _____

Well Data

Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other: Replacement

Date well drilling started: 7-15-05 Date well drilling completed: 7-15-05

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

Static Water Level: 37 feet above or below (circle one) land surface Date measured: 7-15-05

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

Hole depth: 90 Well depth: 90 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 50 feet Casing diameter: 16 inches Type of casing: plu

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

Screen slot size: 1.035 inches Setting depth: From 50 feet to 90 feet

Type of completion (circle all applicable): Gravel packed 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: _____

Name of organization running log(s): _____

I certify that this 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.

Charles M. Nichols 0-0667
Print Name of Water Well Contractor and License No.

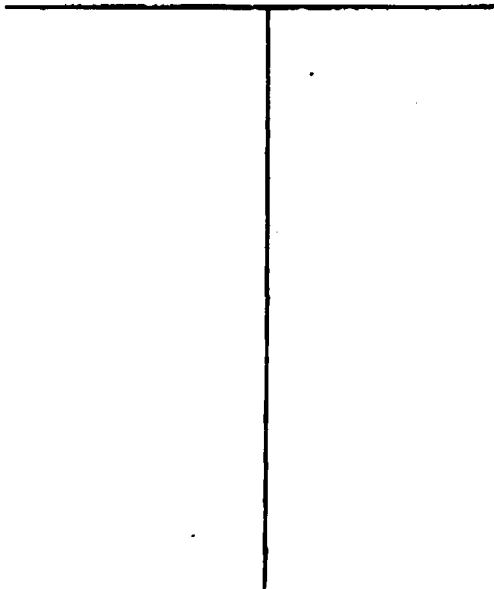
Charles M. Nichols
Signature of Water Well Contractor

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Ground Level



Description of Formations Encountered	From	To
Clay	0	20
Fine sand	20	40
mid to coarse sand	40	50
coarse sand + p-gravel	50	60
coarse sand	60	70
coarse sand + p-gravel	70	80
clay	80	90

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) indicate direction.

Landowner Name: Agua Farms

Charles M. Spickard
 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 10691
Jackson, MS 39289-0691
(601)961-5210
(601)354-6938 (fax)

County: Washington
Permit #:
Driller: Charles M. Nichols
Date completed: 7-26-05

For Office Use Only:
Aquifer:
Well #: H-196
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: Owner Name: Aqua Farms, Mailing Address: 1274 Walnut Rd, Lumberville MS 38701, Telephone No.
Well Location: Latitude: 33°17'03" N, Longitude: 90°58'34" W, Method of Lat/Long: Conventional Survey, USGS quad: Hand-held GPS, Survey-grade GPS, SE 1/4 NW 1/4 Sec 38 Twn 17N Rng 8W, Distance: 4 Miles East of Wayside

Pump Type: Jet, Submersible, Turbine, Flowing Well
Power Type: Diesel Engine, Gasoline Engine, Natural Gas, Electric Motor, Hand, Tractor PTO
Other (specify): Customers Pump moved
Date Pump Installed: Matt Nichols
Rated Pump Capacity: Gallons Per Minute
Horse Power Rating of Motor: 15 Hp.
Setting Depth: 60 feet
Number of Stages: 1

Pump Test Data: Date Well Tested, Static Water Level (A), Pumping Water Level (B), Drawdown (B) - (A), Test Pumping Rate, Duration of Pump Test
Method of Measuring Water Level: Air Line, Electric Measuring Line, Steel Tape
For flowing well, measured start to head: feet
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.
Matt Nichols 0-0667
Print Name of Pump Installer and License No. (if applicable)
Charles M. Nichols
Signature of Pump Installer