

County: Washington
 Permit #: GW 44524
 Driller: Charles M. Nichols
 Date drilling completed: 6-15-11

State Well Report
 Part I - Driller's Log
 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 Office Use Only:
 Agent: _____
 Well #: 44524
 L.S. Elevation: _____
 B-log #: _____

State Law requires that this report be prepared by the licensee holder responsible for the work and filed with the Department at the above address within 30 days of completion of drilling of the well or borehole.

Information on Well Owner
 (Landowner if borehole is not for a water well)
 Owner Name: Ross Plantation
 Mailing Address: P.O. Box 397
Arcole, MS, 38722
 City State Zip Code
 Telephone No. () _____

Well or Borehole Location
 Latitude: 33° 17' 00" N Longitude: 90° 58' 65" W
 Method of Lat/Long (circle one): GPS Conventional Survey
 USGS quad, Hand-held GPS, Survey-grade GPS
 SW. SE. Sec. 30 Twn. 17N Rng. 7W
 Distance 3.1 Miles Direction E of Nearest Town Wigginside

Well / Borehole Data

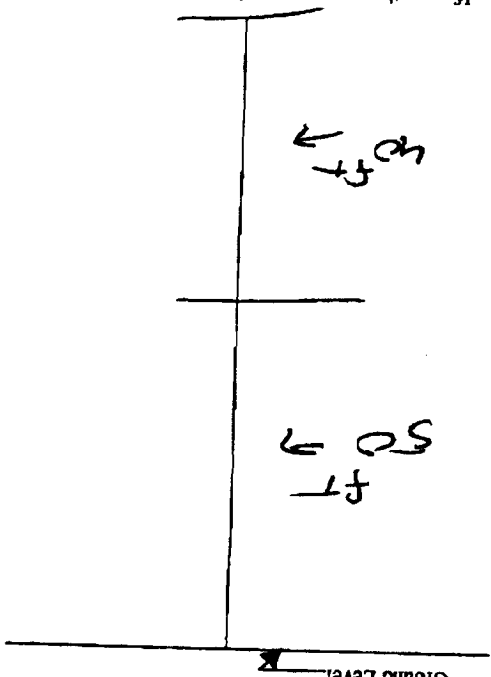
Date drilling started: 6-15-11 Date drilling completed: 6-15-11 Hole depth: 91 ft Hole diameter: 26 in
 Location of the source and volume of surface water used for drilling:
 Method of dosing and volume of Chlorine used in drilling and development:
 Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other
 Name of organization running log(s):
 Purpose of borehole (check one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump
Seismic Survey Other (describe)
 If drilling is not related to water well construction, skip the remainder of this block

Purpose of Well (check one): Home Industrial Public Supply Irrigation Fish Culture Other
 If a flowing well, method of flow regulation: Valve Other (describe)
 Static Water Level: 24 feet above or below (circle one) land surface Date measured:
 Method of Measurement (circle one): Well taps electric tape air line other
 Well depth: 90 feet grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bestonite Mix
 Casing length: 50 feet Casing diameter: 16 inches Type of casing: PVC
 Screen length: 40 feet Screen diameter: 16 inches Type of screen: PVC
 Screen slot size: .035 inches Setting depth: From 50 feet to 90 feet
 Type of completion (circle all applicable): Gravel packed Undertreamed 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 next page

The sketch below only required for water wells

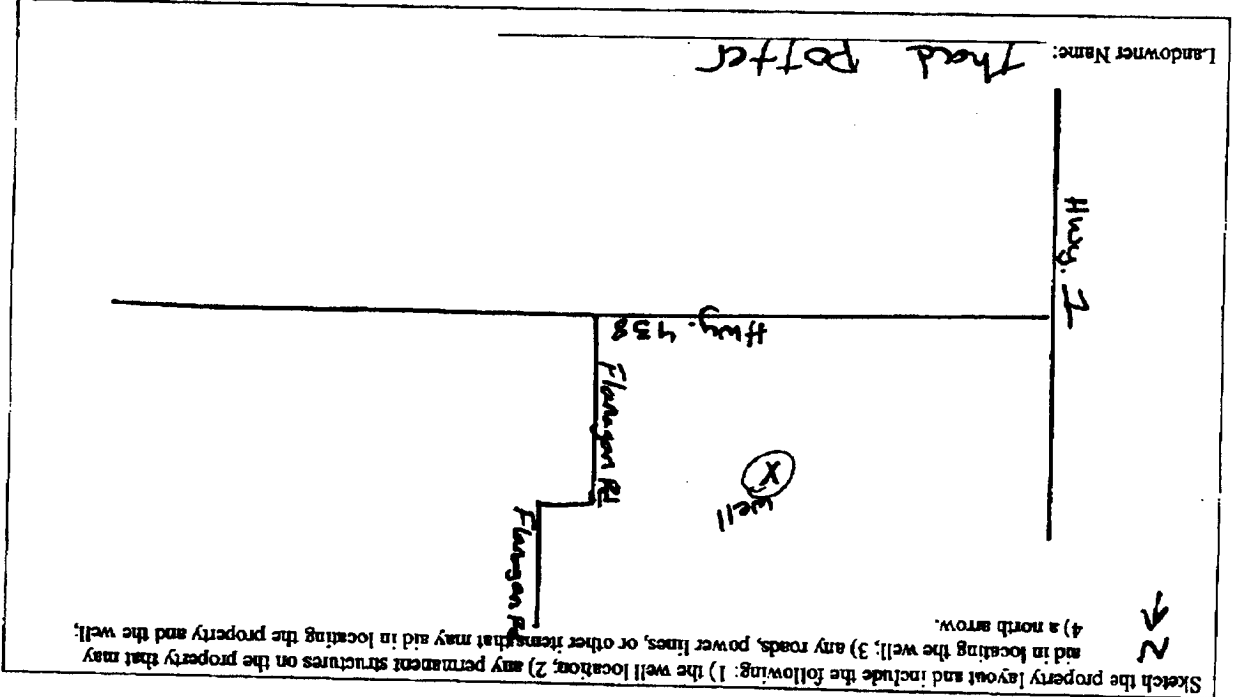
If well telescopes, show depths on sketch

Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulators



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

Description of Formations Encountered	From (depth)	To (depth)
Clay	0	20
Med. Sand	20	50
Med. C. Sand	50	60
C-sand / P-gavel	60	80
Med. Sand	80	90



Form: OLWR-SWR-1A

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 laws.

Print Name of Responsible Licensee and License No. Charles M. Schultz 0-0667 Date 6-21-11 Signature of Licensee Charles M. Schultz

14.252

STATE WELL REPORT

Part 2

Pump Installer's Completion Report
Mississippi Department of Environmental Quality
Office of Land and Water Resources

Jackson, MS 39289-0631
P.O. Box 10631
(601)961-5210
(601)354-6938 (fax)

County: Washington
 Permit #: GW 47524
 Driller: Charles M. Nichols
 Date completed: _____
 (Copy information from block on Part 1)

See Office Use Only:
 Aquifer: _____
 Well #: H052
 Elevation: _____

This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part 1 of the report must be attached and both parts filed with the Department at the above address within 30 days of well completion.

W井 Owner Information

Owner Name: Poss Plantation
 Mailing Address: P.O. Box 397
 City: Arack MS State: MS Zip Code: 38722
 Telephone No. () _____

Well Location

Latitude: 33.17908 Longitude: 90.59652
 Method of Lat/Long (check one): Hand-held GPS Survey-grade GPS
 USGS quad: SW18 SE1/4 Sec 30 T17N R 7W
 Direction: E of Wayside Nearest Town: _____
 Distance: 3 Miles

Pump Type

Circle one

Submersible Jet Piston Turbine Air Lift Bucket Centrifugal Other (specify): _____

Date Pump Installed: _____
 Rated Pump Capacity: _____ Gallons Per Minute

Power Type

Circle one

Natural Gas Diesel Engine Gasoline Engine Hand Tractor PTO Electric Motor Windmill Other (specify): Power line
 Horse Power Rating of Motor: 25 HP
 Setting Depth: 70 feet
 Number of Stages: _____

Pump Test Data

Date Well Tested: _____
 Static Water Level (A): 24 Feet Below Land Surface
 Pumping Water Level (B): _____ Feet Below Land Surface
 Drawdown ((B) - (A)): _____ Feet Below Land Surface
 Test Pumping Rate: _____ Gallons Per Minute
 Duration of Pump Test (minimum 4 hours): _____ hours

Method of Measuring Water Level

Circle one

Air Line Electric Measuring Line Steel Tape Other (specify): _____

For flowing well, measured shut in 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.

Print Name of Pump Installer and License No. (if applicable): Charles M. Nichols 0-067
 Signature of Pump Installer: Charles M. Nichols

STATE OF MISSISSIPPI

**Department of Environmental Quality
Office of Land and Water Resources**

P. O. Box 2309

Jackson, Mississippi 39225

PERMIT

TO DIVERT OR WITHDRAW FOR BENEFICIAL USE THE PUBLIC WATERS

This permit is issued to the landowner named below in accordance with the provisions of the Mississippi Water Laws, Mississippi Code Sections 51-3-1, et seq. (1972, as amended), and the regulations and standards as promulgated thereunder. Whether or not specifically named in this permit or in the applications for this permit, anyone using water from the diversion/withdrawal point described below shall do so in compliance with the provisions of this permit. Neither this permit, nor any authority conferred hereby, may be sold, conveyed, encumbered, assigned, or otherwise aliened, for any period of time or under any conditions whatsoever. This permit may not be modified, transferred or revoked without prior action by the Permit Board. Any attempts to modify, transfer or revoke this permit, or to take any other action on this permit, shall be invalid and unenforceable and may result in immediate revocation or suspension of this permit. The holder of this permit shall at all times be responsible for adherence to the terms and conditions of this permit. No agreement between the permit holder and any other party shall affect the obligations and liabilities of the permit holder. Water use under this permit is allowed only when the streamflow, lake level elevation, or static groundwater level (whichever, if any, is applicable) is above the established minimum, pursuant to Mississippi Code Section 51-3-7. Authorization is hereby granted to divert/withdraw water for the beneficial use designated herein, and for no other purpose, subject to the following terms, conditions, and limitations:

Permit Number: MS-GW-44524

Landowner Name: ROSS PLANTATION

Landowner Address: PO BOX 397

ARCOLA

MS 38722

Source Of Water: MISSISSIPPI RIVER VALLEY ALLUVIAL AQUIFER

Beneficial Use: IRRIGATION

Division/Withdrawal Location: SW 1/4 of the SE 1/4

Section: 30

Township: 17N

Range: 07W

County: WASHINGTON

Quad: ARCOLA

Maximum Volume: 240 Acre-Foot/Year equivalent to .2142 Million Gallons/Day

Maximum Rate: 2500 Gallons/Minute

Applicant Name: ROSS PLANTATION

Applicant Address: PO BOX 397

ARCOLA

MS 38722

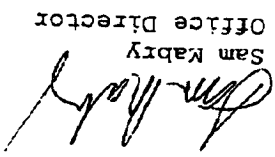
Date Permit Issued: 10/28/2010

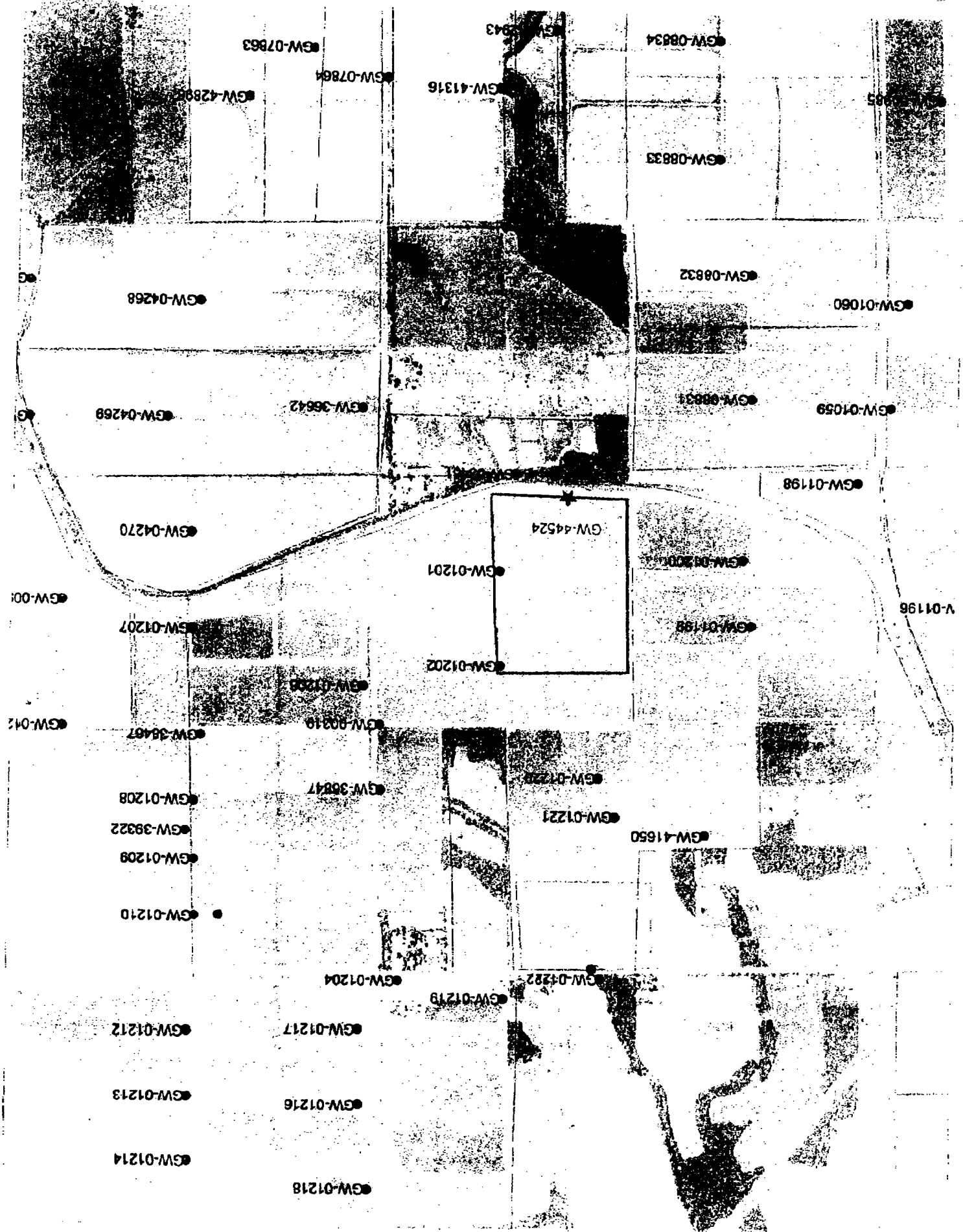
Date Permit Expires: 11/22/2020

Date Permit Modified:

Date Permit Re-issued:

This permit shall be deemed null and void if construction has not begun within one (1) year of permit issue date
SPECIAL TERMS AND CONDITIONS: NONE


Sam Kabry
Office Director



H.259