

Dated 9-9-09

County: Washington
 Permit #: _____
 Driller: Charles M. Nichols
 Date drilling completed: 8-17-09

State Well Report
Part 1 - 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:
 Aquifer: _____
 Well #: M.214
 L. S. Elevation: _____
 E-log #: _____

State Law requires that this report be prepared by the license 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: HOLLANDALE FARMS
 Mailing Address: 72 TENNISON RD.
Hollandale MS 38748
 City State Zip Code

Telephone No. () _____

Well or Borehole Location 90-45-4C
33-11-47
 Latitude: 33° 12' 64" N Longitude: 89° 47' 58" W
 Method of Lat/Long (circle one): Conventional Survey, 33
 USGS quad, Hand-held GPS, Survey-grade GPS
NW 1/4 NW 1/4 Sec 31 Twn 16 N Rng 5 W
 Distance Direction Nearest Town
5 1/2 Miles NE of Hollandale

Well / Borehole Data

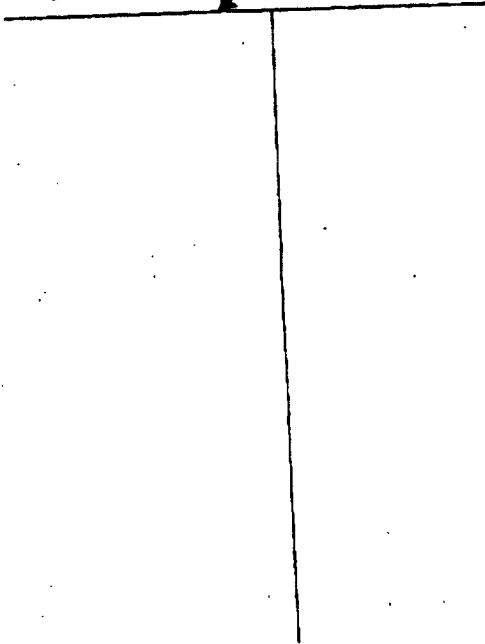
Date drilling started: 8-17-09 Date drilling completed: 8-17-09 Hole depth: 103 Hole diameter: 26
 Location of the source of any surface water used for drilling: slough
 Method of dosing and volume of Chlorine used in drilling and development: 177H
 Logs run (circle all applicable): No log run Electric 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: 27 ft feet above or below (circle one) land surface Date measured: _____
 Method of Measurement (circle one) steel tape electric tape air line other: _____
 Well depth: 100 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix
 Casing length: 60 feet Casing diameter: 16 inches Type of casing: pile
 Screen length: 40 feet Screen diameter: 16 inches Type of screen: pile
 Screen slot size: .035 inches Setting depth: From 60 feet to 100 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 next page*

(no pump)

The sketch below only required for water wells

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

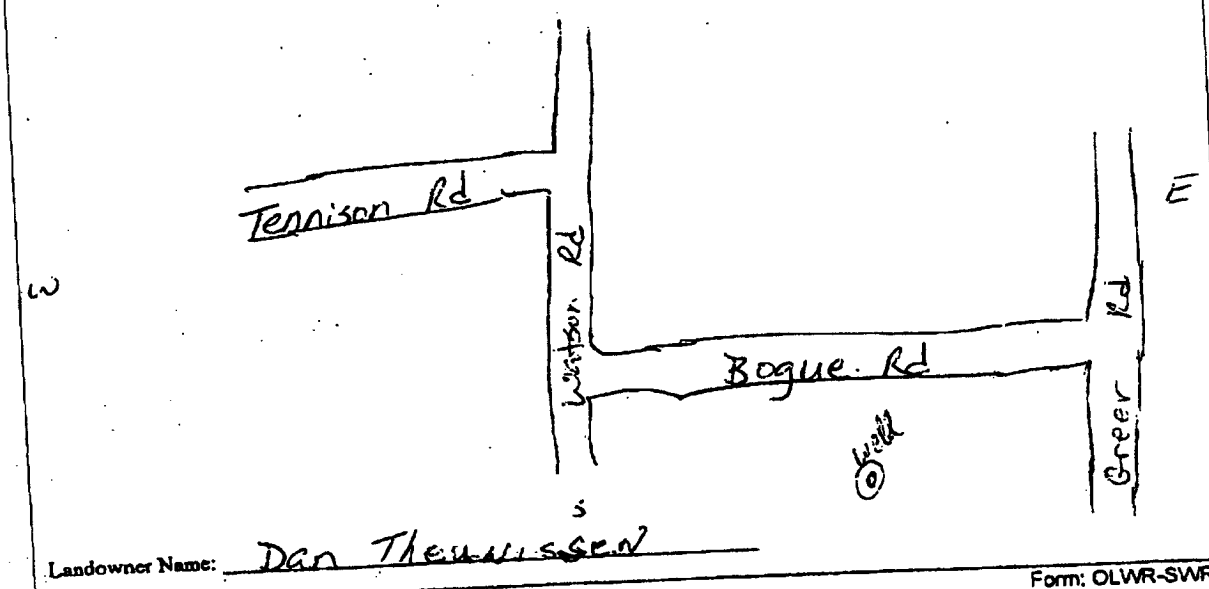
If well telescopes, show depths on sketch
Ground Level K



Description of Formations Encountered	From (depth)	To (depth)
Clay	Ground Level	15
Sandy clay	15	30
Course sand & little p-gravel	30	40
Med to Course sand	40	50
Course sand & p-gravel	50	100
Fine sand	100	103

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.



Landowner Name: Dan Thewissen

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. Nichols 0-066799-09 Date

Signature of Licensee Charles M. Nichols

(no pump)