

Part 2 never received 3/13

County: Hancock
 Permit #: _____
 Driller: Necoise Well Service
 Date drilling completed: 6-13-08

State Well Report
Part 1 - Driller's Log

Mississippi Department of Environmental Quality
 Office of Land and Water Resources
 P.O. Box 2309
 Jackson, MS 39225
 (601)961-5210
 (601)360-0522 (Fax)

For Office Use Only:
 Aquifer: _____
 Well #: M-148
 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 <i>(Landowner if borehole is not for a water well)</i> | Well or Borehole Location |
|---|--|
| Owner Name: <u>Wolfe Living</u> | Latitude: <u>30° 16' 50"</u> Longitude: <u>89° 26' 49"</u> |
| Mailing Address: <u>7091 W. Elrod Avenue</u> | Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS |
| <u>Bay St. Louis, MS 39520</u> | NE 1/4 NE 1/4 Sec <u>12</u> Twn <u>9S</u> Rng <u>15W</u> |
| City: _____ State: _____ Zip Code: _____ | Distance _____ Direction _____ Nearest Town _____ |
| Telephone No. <u>(228) 467-9623</u> | <u>2</u> Miles <u>N</u> of <u>Lake Shore</u> |

Well / Borehole Data

Date drilling started: 6-13-08 Date drilling completed: 6-13-08 Hole depth: 110' Hole diameter: 4"

Location of the source of any surface water used for drilling: Shreveport City Water & Sewer

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: 12 feet above on below (circle one) land surface Date measured: 6-13-08

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

Well depth: 110 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 100 feet Casing diameter: 2" inches Type of casing: PVC

Screen length: 10 feet Screen diameter: 2" inches Type of screen: PVC

Screen slot size: .006 inches Setting depth: From 100 feet to 110 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*

Form: OLWR-SWR-1A

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 JUN 25 2008
 BY: OLWF

