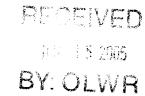
	1 State W	ell Report	E. Office Hea Only		
County: MArshall	Part 1 – D	For Office Use Only:			
·	Mississippi Department of Environmental Quality		Aquifer:		
Permit #:	Office of Land and Water Resources		Well #: D - 88		
Driller: Joves w. Mason.	P.O. Box 10631 Jackson, MS 39289-0631		L. S. Elevation:		
Date drilling completed: 6-31-65	1	961-5210			
	(601)354	-6938 (fax)	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	-	Well or Bo	rehole Location		
(Landowner if borehole is not f	·	Latitude 34 . 54 .770	" Longitude. 89 <u>41</u> ,368 "		
Owner Name Earnest Wilk	tins	Method of Lat/Long (circle one): Conventional Survey,			
Mailing Address: 1483 Hay 309 N		Method of Lat/Long (circle one): Conventional Survey,			
Mailing Address: 1100 Hand	<u> </u>	USGS quad, Hand-held GPS, Survey-grade GPS SE 1/4 NE 1/4 Sec 1 4 Twn 35 Rng 5			
-		SEV 19 14	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
Bulvalia M	38611	JL 4 PL 4 Sec	_ Iwn_ 9 3 Rng_ 9 3		
Bylholia M City Ste	ite Zip Code	Distance Direction 3'14 Miles	Nearest Town		
Telephone No. (662) 274 - 4	แล	3'14 Miles 5	of Borton		
Telephone No.					
	Well / Bore	hole Data			
Date drilling started: 6 - 31 - 5 Date dr	rilling completed: 6-31-9	Hole depth: 166	Hole diameter: 634		
Location of the source of any surface wat Method of dosing and volume of Chlorir	er used for drilling:	JA onments IA			
	_				
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:					
Purpose of borehole (check one): Water V	Vell Geotechnical/Geolo	ogical 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:feet above or below circle one) land surface Date measured:					
Method of Measurement (circle one) steel tape electric tape air line other: String / weight					
Well depth: Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix					
Casing length: 156 feet Casing diameter: 4 inches Type of casing: poc					
Screen length: 10 feet Screen diameter: 4 inches Type of screen: poc					
Screen slot size: . O 10 inches Setting depth: From 156 feet to 66 feet					
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development					
	Other (describe):				

Form: OLWR-SWR-1A



The	sketch	helow	only	reasired	for	water wells
1116	JACILII	UCIUN	Ulter	<i>i</i> cy <i>i</i> ii cu	ıvı	water wears

If well telescopes, show depths on sketch.

Ground Level-

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

Description of Formations Encountered	From (depth)	To (depth)
clay dirt.	Ground Level	24
grovel	94	40
while clay	40	70
while soul	70	୧୦
while clay	G)	94
while south	જૈપ્	166
	1	
	1	
	1	<u> </u>
	1	
1		

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

Sketch the property layout and include the following: 1) the well lo aid in locating the well; 3) any roads, power lines, or 4) a north arrow.	cation; 2) any permanent structures on the property that may other items that may aid in locating the property and the well;
	Mause
5	Z Coen
Huy 309 N.	
Landowner Name: Formest wilkins	<u> </u>

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 Envir	onmental Quality	and the Mississippi Dep	artment of Heal	th regulations,	if applicable, and state
laws.	V-634	7-13-05		a. Ma	

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee

40, 15 206

BY. OLWA

STATE WELL REPORT Part 2 County: MArshall For Office Use Only: **Pump Installer's Completion Report** Mississippi Department of Environmental Quality Aquifer: Office of Land and Water Resources P.O. Box 10631 Well #: **D**-Jackson, MS 39289-0631 Date completed: 6-21-05 (601)961-5210 Elevation: (601)354-6938 (fax) Copy information from block on Part 1 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. Well Owner Information Well Location Latitude: 34-54.770 Longitude: 89.41.368 ### Longitude: 89.41.368 Method of Lat/Long (check one): Conventional Survey______ Owner Name: Earrest Wilkins Mailing Address: 1483 Hy USGS quad , Hand-held GPS , Survey-grade GPS SE "NE " Sec 14 T 25 R Direction Distance Nearest Town Telephone No. (662) 274-4112 S of Borton Power Type Pump Type Circle one Circle one Submersible) Diesel Engine Gasoline Engine Air Lift Jet Natural Gas Electric Motor Bucket Turbine Hand **Tractor PTO** Piston Centrifugal Rotary Flowing Well Windmill Other (specify): ___ Horse Power Rating of Motor: Other (specify): Date Pump Installed: 6 - 21-05 Setting Depth: _____/ 40 Rated Pump Capacity: Number of Stages: Gallons Per Minute Pump Test Data Method of Measuring Water Level Circle one Date Well Tested: 6-21-05 Electric Measuring Line Air Line Steel Tape Static Water Level (A): Feet Below Land Surface Other (specify): String weight. Pumping Water Level (B): $^{\wedge\Delta}$ Feet Below Land Surface Drawdown [(B) - (A)]: $\nearrow A$. Feet Below Land Surface For flowing well, measured shut in head: ___ Test Pumping Rate: Well yielded GPM with a drawdown of Gallons Per Minute Duration of Pump Test (minimum 4 hours): _______ hours hours of pumping I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

Ines v. Moser-

Print Name of Pump Installer and License No. (if applicable)

HILLS 2005

Signature of Pump Installer

BYOLWA