	State W	ell Report				
County: Marshall	State Well Report Part 1 – Driller's Log		For Office Use Only:			
Permit #:	Mississippi Departmen	t of Environmental Quality	Aquifer:			
		nd Water Resources Sox 10631	Well #: <u>N - 9 4</u>			
Driller: Jones W. Moson		IS 39289-0631	L. S. Elevation:			
Date drilling completed (1/23-07	` ,	961-5210				
	(601)354	4-6938 (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 O		Well or Bo	rehole Location			
(Landowner if borehole is not fo		Latitude: 34 • 41 • 88" Longitude: 89 • 36 • 486"				
Owner Name Iro Wolker	<u> </u>		ne): Conventional Survey,			
Mailing Address:						
868 chulo	vom rd.		GPS, Survey-grade GPS			
	MS 38635 NW1/NE 1/ Sec 34		Twn 45 Rng 4w			
City / UStat	e Zip Code	Distance Direction	Nearest Town			
Telephone No. (662) 964 - 29	12	Miles Just	of Mallowa			
Well / Borehole Data						
Date drilling started: 11-33-07 Date drilling completed: 11-33-07 Hole depth: 110 Hole diameter: 63/4						
Location of the source of any surface water used for drilling: WA 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): HomeIndustrial Public Supply Irrigation Fish Culture Other:						
If a flowing well, method of flow regulation: Valve Other (describe)						
Static Water Level: 30 feet above of below circle one) land surface Date measured: 11-37-07						
Method of Measurement (circle one) steel tape electric tape air line other: string lueignt						
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: inches Type of casing:						
Screen length: 10 feet Screen diameter: 4 inches Type of screen: 00 C						
Screen slot size: CIO inches Setting depth: From (OO feet to (IO feet						
Type of completion (circle all applicable):	Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development					
Other (describe):						

Top of lap pipe or reduction in casing: _

Form: OLWR-SWR-1A

feet. If telescoped or more than one screen, describe on next page

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BY: OLWR

Description of formations encountered must be provided for all

wells and boreholes, unless specifically exempted by regulations

Ground Level		rmations Encountered		To (depth)
	Clay	dirt.	Ground Level	30
	CIMITE	3000		10
			· · · · · ·	<u> </u>
		·		
			- [-	ļ
If more than one screen, show location of each on sketch				
Sketch the property layout and include the following: 1) the well aid in locating the well; 3) any roads, power lines, 4 a north arrow.	or other items that m	manent structures on the nay aid in locating the pro	property that may operty and the well	1;
	8			
	المعس			
S bouse				
house			2	
givener				
Q1 V				
\				
1		W		
Landowner Name: Isq wolker				
Daniel Halle.				
T (0 d (d) 10 - 11 - 12 - 12 - 12 - 12 - 12 - 12 -		amaa wiith all ammliaakli	Form: OLWF	
I certify that the well/borehole was drilled, constructed, and constructed and constructed and constructed are selected as a selected at the selected and constructed are selected as a selected at the select				
Mississippi Department of Environmental Quality and the Mi	ssissippi Departme	nt of Health regulation	s, ii appiicabie, ai	iu state
Jacks wy Masons 0-620	37:47.	Janes	_	

Date

Print Name of Responsible Licensee and License No.

The sketch below only required for water wells

If well telescopes, show depths on sketch.

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Signature of Licensee

STATE WELL REPORT

Part 2

Pump Installer's Completion Report Mississippi Department of Environmental Quality

For Office Use Only:			
Aquifer:			
Well #: N - 9 4 Elevation:			

Permit #:	1 ** *	Mississippi Department of Environmental Quality Aquifo		
Driller: James w. Mosa~		and Water Resources Box 10631	N CII	
Date completed: 11-27-07	Jackson, M	IS 39289-0631	Well #: N - 94	
		961-5210 4-6938 (fax)	Elevation:	
Copy information from block on Part 1	`	` ,		
This part of the report must be complete report must be attached and both parts j				
Well Owner Inform			l Location	
Owner Name: Ira Wolke	<u>r</u>	Latitude: 34.41-88 Longitude: 89.36.406		
Mailing Address:		Method of Lat/Long (check one): Conventional Survey, USGS quad, Hand-held GPS V, Survey-grade GPS		
868 Chuloh	iono (d.			
City State				
City State	N12 38635	Distance Direction Nearest Town		
Telephone No. (663-564-2922		1114 Miles Sw of Marienna		
Pump Type	·	Po	wer Type	
Circle one			ircle one	
Air Lift Jet	Submersible	Diesel Engine Gasolii	ne Engine Natural Gas	
Bucket Piston	Turbine (Electric Motor Hand	Tractor PTO	
Centrifugal Rotary	Flowing Well	Windmill Other	(specify):	
Other (specify):		Horse Power Rating of Motor	314	
Date Pump Installed: 11-37-07	7	Setting Depth:	feet	
Rated Pump Capacity: 10	Gallons Per Minute	Number of Stages: 8		
Pump Test Dat	a	Method of Me	easuring Water Level	
Date Well Tested: いっ みつっつ			ircle one	
		Air Line Electric Mea	suring Line Steel Tape	
Static Water Level (A): Feet Below Land Surface		Other (specify): String I weight		
Pumping Water Level (B):Fee	et Below Land Surface	Outer (specify): 300 (N)	1 over 1 cm	
Drawdown [(B) – (A)]:Feet Below Land Surface		For flowing well, measured shut in head:feet		
Test Pumping Rate: Gallons Per Minute		Well yielded GPM with a drawdown of		
Duration of Pump Test (minimum 4 hours	s): <u>24</u> hours	feet after_	hours of pumping	
	-			
I HEREBY CERTIFY that the above state	ements are true to the best o	of my knowledge.		
Jones w. Moson C)-630	Jew W. N	laz	

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

County: Marshall

Signature of Pump Installer

Form REGENVED

DEC 26 2007

BY: OLWA