

DAVID WALKER

# State Well Report

## Part 1

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)

County: SUNFLOWER  
 Permit #: 66042482  
 Driller: J. NEWCOME 0-773  
 Date drilling completed: 4-11-08

For Office Use Only:  
 Aquifer: \_\_\_\_\_  
 Well #: T-138  
 L. S. Elevation: \_\_\_\_\_  
 E-log #: \_\_\_\_\_

State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.

Well Owner Information	Well Location
Owner Name: <u>JORA WALKER FARMS</u>	Latitude: <u>33° 17' 37"</u> Longitude: <u>90° 36' 44"</u>
Mailing Address: <u>22377 US Hwy 49</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>Hand-held GPS</u> Survey-grade GPS
<u>Isola, Ms. 38754-9731</u>	<u>SE</u> ¼ <u>SW</u> ¼ Sec <u>28</u> Twn <u>17N</u> Rng <u>4W</u>
City State Zip Code	Distance Direction Nearest Town
Telephone No. <u>(602) 207-1088</u>	<u>4</u> Miles <u>SOUTH</u> of <u>INVERNESS</u>

**Well Data**

Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other: \_\_\_\_\_

Date well drilling started: 4-11-08 Date well drilling completed: 4-11-08

If flowing, 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: \_\_\_\_\_

Hole depth: 123 Well depth: 120 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 80 feet Casing diameter: 16 inches Type of casing: P.V.C.

Screen length: 40 feet Screen diameter: 16 inches Type of screen: P.V.C.

Screen slot size: .050 inches Setting depth: From 80 feet to 120 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 back of page

Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: \_\_\_\_\_

Name of organization running log(s): \_\_\_\_\_

I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

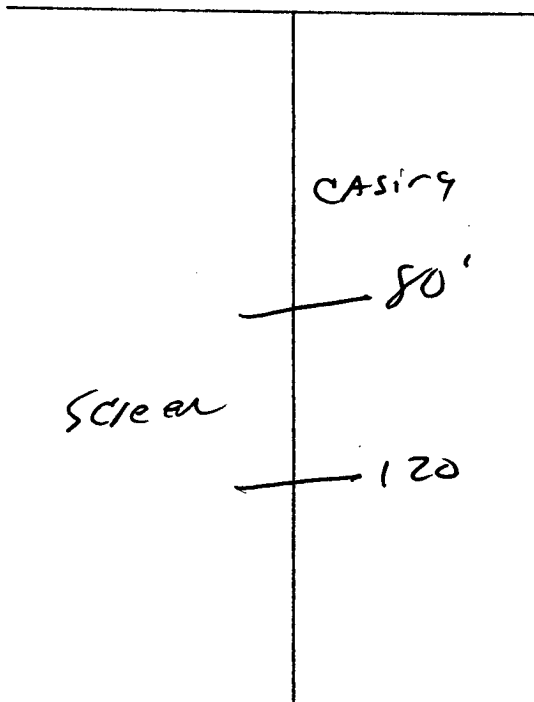
JOHN NEWCOME 0-773 \_\_\_\_\_  
 Print Name of Water Well Contractor and License No. Signature of Water Well Contractor

Pivot Well - Pump NOT SET YET

RECEIVED  
 MAY 09 2008  
 BY: OLWR

If well telescopes please sketch below and show depths.

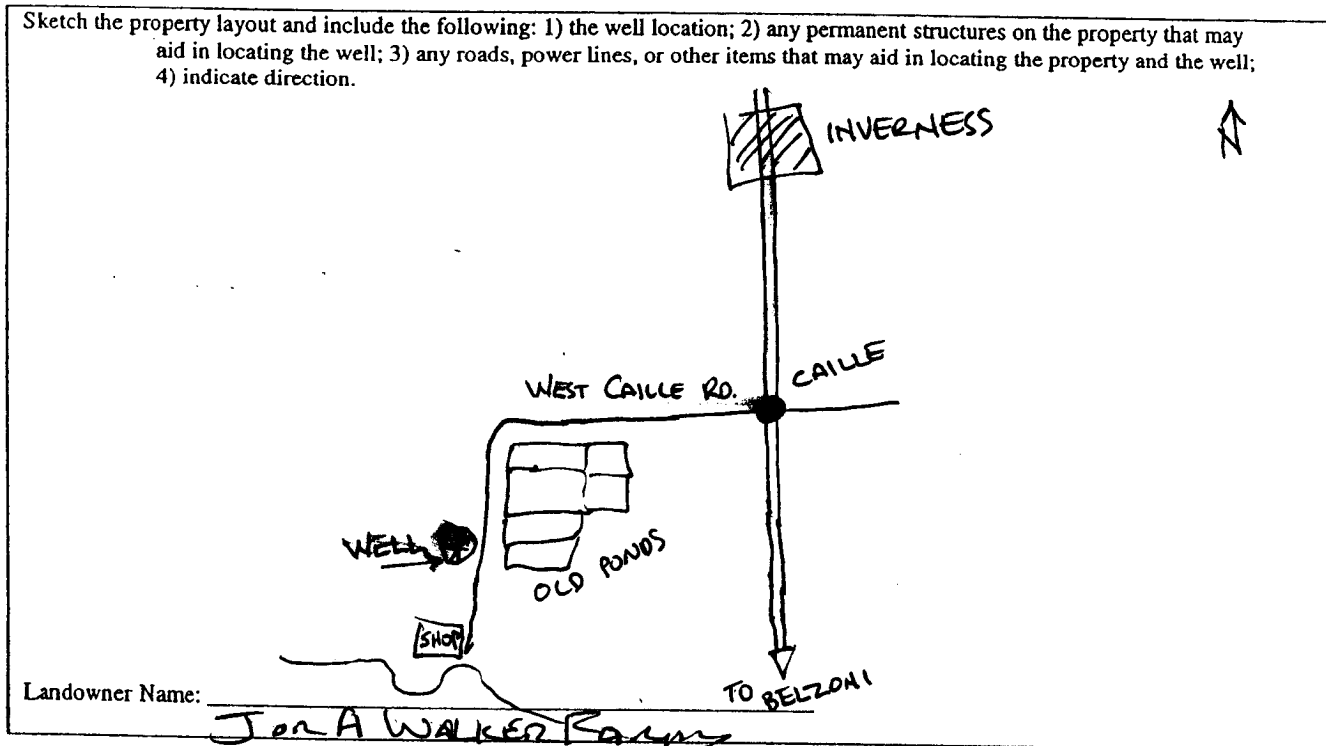
Ground Level



Description of Formations Encountered	From	To
TOP SOIL	0	10
MIX CLAY	10	38
Med. Sand	38	80
COARSE Sand gravel	80	123

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) indicate direction.



Landowner Name: Jon A Walker Farms

John Newman  
Signature of Water Well Contractor