

Never received part 2 3/2013

# 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)

For Office Use Only:

Aquifer: \_\_\_\_\_  
Well #: A-58  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: Amite  
Permit #: \_\_\_\_\_  
Driller: Fitzgerald Well Service  
Date drilling completed: 3-2-05

*Fitzgerald Well Service, Inc*

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>Mr. Huff</u>	Latitude: <u>31° 18' 36"</u> Longitude: <u>90° 58' 34"</u>
Mailing Address: <u>East Homochito Rd</u>	Method of Lat/Long (circle one): <input type="checkbox"/> Conventional Survey, <input type="checkbox"/> USGS quad, <input type="checkbox"/> Hand-held GPS, <input type="checkbox"/> Survey-grade GPS
<u>Gloster</u> <u>MS</u>	<u>NE 1/4 SE 1/4</u> Sec <u>17</u> Twn <u>4N</u> Rng <u>2E</u>
City State Zip Code	Distance Direction Nearest Town
Telephone No. ( )	<u>7</u> Miles <u>North</u> of <u>Gloster</u>

**Well Data**

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

Date well drilling started: 3-2-05 Date well drilling completed: 3-2-05

If flowing, method of flow regulation: Valve \_\_\_\_\_ Other (describe) \_\_\_\_\_

Static Water Level: 38' feet above or below (circle one) land surface Date measured: 3-2-05

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

Hole depth: 90' Well depth: 90' Well grouted to a depth of 10' feet

Type of grout (circle one): Cement Bentonite  Mix

Casing length: 80' feet Casing diameter: 4" inches Type of casing: PVC

Screen length: 10' feet Screen diameter: 4" inches Type of screen: PVC

Screen slot size: .010 inches Setting depth: From 80' feet to 90' 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.

Brad Fitzgerald 029  
Print Name of Water Well Contractor and License No.

Brad Fitzgerald  
Signature of Water Well Contractor

*No Pump set.*

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MAR 31 2005

BY: OLWR

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

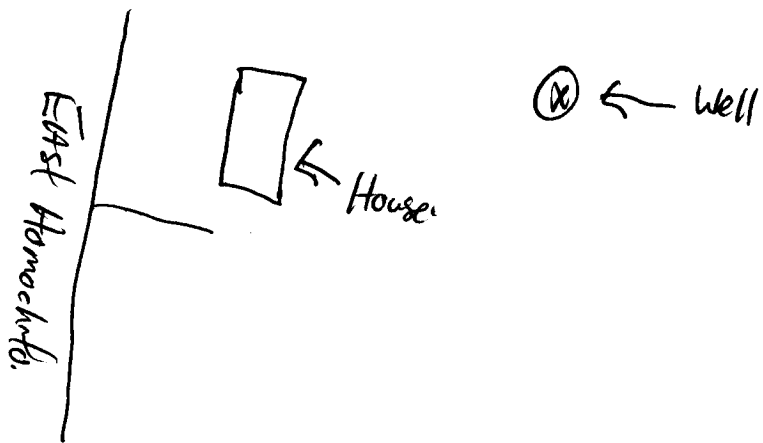
If well telescopes, show depths on sketch.

Ground Level → **A-58**

Description of Formations Encountered	From (depth) To (depth)	
	Ground Level	
Clay	0	20
Sand	20	60
Clay	60	80
Sand + gravel	80	90

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: Mr. Huff

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.

BRAD EDGERARD 029. 3-205 Brad Styrak

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee

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