

# 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 39225-2309  
 (601)961-5555  
 (601)961-5228 (fax)

#### For Office Use Only:

Well #: H 38  
 Aquifer: \_\_\_\_\_  
 E-Log #: \_\_\_\_\_

County: Covington  
 Permit #: \_\_\_\_\_  
 Driller: Walker-Hill Environmental, Inc.  
 Date drilling completed: 7/6/17

*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.*

Well Owner Information <i>(Landowner if borehole is not for a water well)</i>	Well or Borehole Location
Owner Name: <u>Williams Gas Pipeline Transco</u>	Latitude: <u>31° 36' 59"</u> Longitude: <u>89° 25' 01"</u>
Mailing Address: <u>421 Salt Dome Road</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
<u>Seminary</u> MS <u>39047</u>	NW <input checked="" type="checkbox"/> SW <input checked="" type="checkbox"/> Sec <u>33</u> T <u>8N</u> R <u>14W</u>
City State Zip Code	<u>6.1</u> Miles <u>NE</u> of <u>Seminary</u>
Telephone No. ( <u>601</u> ) <u>736-3500</u>	(Distance) (Direction) (Nearest Town)

**Well / Borehole Data**

Date drilling started: 6/28/17 Date drilling completed: 7/6/17 Hole depth: 270' Hole diameter: 7-7/8"

Location of the source of any surface water used for drilling: Southwest Jones Water Association

Method of dosing and volume of Chlorine used in drilling and development: \_\_\_\_\_

Logs run (check all applicable):  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 all applicable):  Home  Industrial  Public Supply  Irrigation  Fish Culture

Other (describe): Monitoring Well Well Name: RC-D

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

Static Water Level: \_\_\_\_\_ feet  above or  below land surface Date measured: \_\_\_\_\_  
(check one)

Method of measurement (check one)  Steel tape  Electric tape  Air line  Other (describe): \_\_\_\_\_

Well depth: 270' Well grouted to a depth of: 194 feet Type of grout (check one)  Neat Cement  Bentonite  Mix

Casing length: 194 feet Casing diameter: 4 inches Type of casing: Carbon Steel

Screen length: 65 feet Screen diameter: 2 inches Type of screen: Stainless Steel

Screen slot size: .006/.008 inches Setting depth: From 195 feet to 260 feet

Type of completion (check all applicable)  gravel packed  Underreamed  Open hole  Natural Development

Other (describe): (5" casing 0-21') Pre-Pack Screen (.006 195'-235' & .008 235'-260') (10' sump 260'-270' 2" SS)

Top of lap pipe or reduction in casing: 189 feet

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

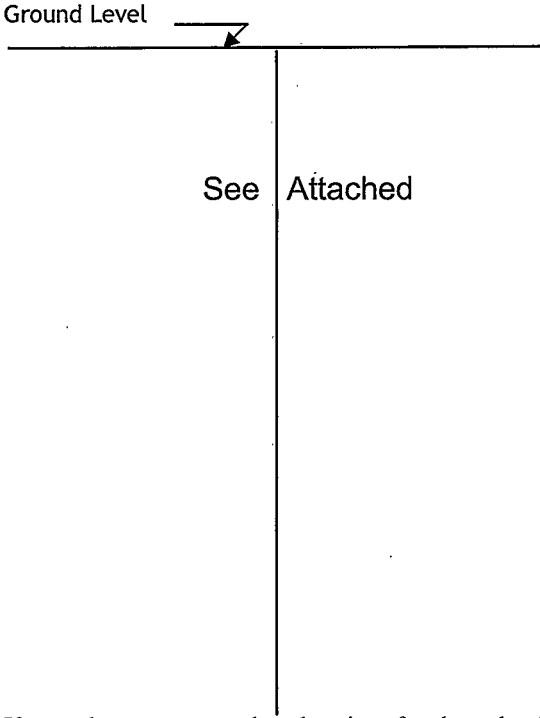
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County: Covington  
Permit #: \_\_\_\_\_

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The sketch below only required for water wells

If well telescopes, show depths on sketch.



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

Description of Formations Encountered	From (depth) Ground level	To (depth)
sandy clay	0	40
sand	40	70
sandy clay	70	100
clay w/sand mix	100	200
sand fine	200	230
sand (w peagravel 240-260)	230	270

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) north arrow

See Attached Site Map

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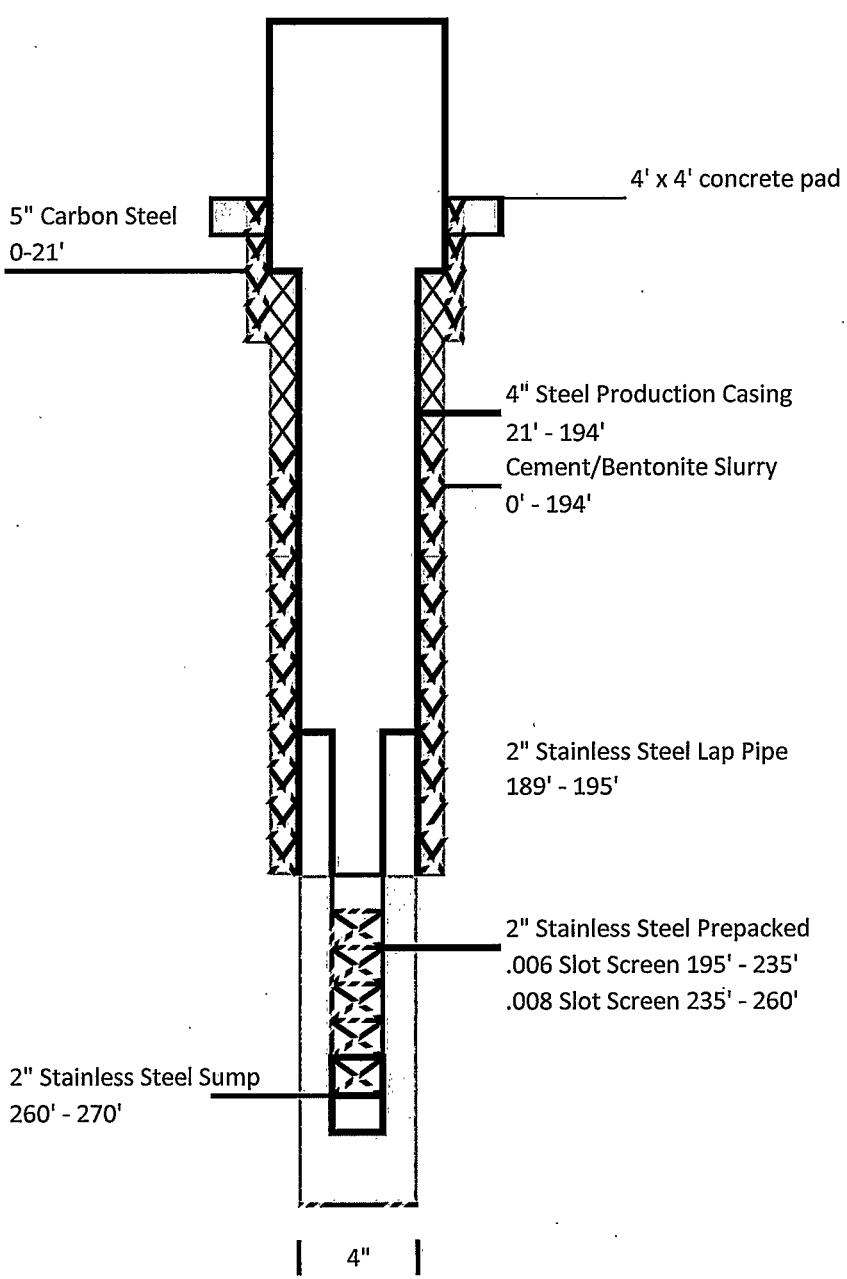
Landowner Name: \_\_\_\_\_

I HEREBY 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.


Gary P. Hill    0-578    7/14/17  
Print Name of Responsible Licensee and License No.    Date

  
Signature of Licensee

H38



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 Walker-Hill Environmental, Inc.  
Foxworth, MS  
Well Construction Diagram  
Williams Gas Pipeline Transco  
RC-D