

County: George
 Permit #: _____
 Driller: M. L. Ward
 Date drilling completed: 3-26-09

State Well Report
Part 1 – Driller's Log
 Mississippi Department of Environmental Quality
 Office of Land and Water Resources
 P.O. Box 2307
 Jackson, MS 39225
 (601)961- 5210
 (601)961- 5228 (fax)

For Office Use Only:

Aquifer: _____
 Well #: D-140
 L. S. Elevation: _____
 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 Owner (Landowner if borehole is not for a water well)	Well or Borehole Location
Owner Name: <u>Lawrence Hayer</u>	Latitude: <u>30° 59' 29" N</u> Longitude: <u>88° 26' 40" W</u>
Mailing Address: <u>106 Hertie Pkwy Rd</u>	Method of Lat/Long (circle one): Conventional Survey
<u>Lucedale</u> <u>Ms</u> <u>39452</u>	USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS
City State Zip Code	<u>NE</u> ¼ <u>SE</u> ¼ Sec <u>2</u> Twn <u>T15</u> Rng <u>R5W</u>
Telephone No. () _____	Distance <u>8</u> Miles Direction <u>N2</u> of Nearest Town <u>Lucedale</u>

Well / Borehole Data

Date drilling started: 3-26-09 Date drilling completed: 3-26-09 Hole depth: 90 Hole diameter: 4 1/2

Location of the source of any surface water used for drilling: NONE

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): Home ☒ Industrial _____ Public Supply _____ Irrigation _____ Fish Culture _____ Other: _____

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

Static Water Level: 50 feet above or below (circle one) land surface Date measured: _____

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

Well depth: 90 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 80 feet Casing diameter: 2 inches Type of casing: PVC 40

Screen length: 10 feet Screen diameter: 2 inches Type of screen: PVC wrapped

Screen slot size: 8 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 next page*

Form: OLWR-SWR-1A (04/08)

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The sketch below only required for water wells

If well telescopes, show depths on sketch.

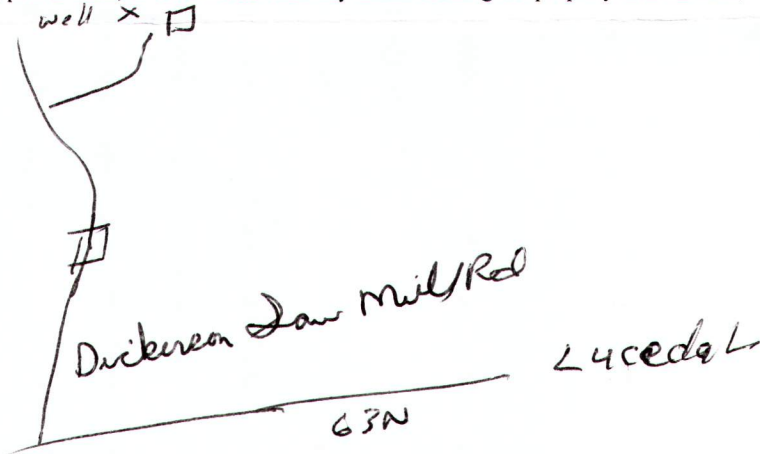
Ground Level.

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

[illegible]

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:

Lawrence Hayes

Form: OLWR-SWR-1A (04/08)

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.

laws. Michael R Fryfog 10408 3-26-09

Print Name of Responsible Licensee and License No.

Date _____

Signature of Licensee

Signature of Licensee

MAR 25 2009

BY: OLWR

STATE WELL REPORT

Part 2

Pump Installer's Completion Report
Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225
(601)961-5210
(601)961-5228 (fax)

For Office Use Only:

Aquifer: _____

Well #: D-140

Elevation: _____

County: George

Permit #: _____

Driller: Mike Wade

Date completed: 3-27-09

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

Owner Name: Lawrence Hayer

Mailing Address: 106 Hester Rogers Rd

Lucedale Ms 39452
City State Zip Code

Telephone No. (____) _____

Well Location

Latitude 30-59-29N Longitude: 088-26-90W

Method of Lat/Long (check one): Conventional Survey _____

USGS quad _____, Hand-held GPS, Survey-grade GPS _____

____ 1/4 ____ 1/4 Sec 2 T 15 R R5W

Distance Direction Nearest Town
8 Miles NE of Lucedale

Pump Type

Circle one

Air Lift Jet Submersible
Bucket Piston Turbine
Centrifugal Rotary Flowing Well
Other (specify): _____

Date Pump Installed: 3-27-09

Rated Pump Capacity: 8-12 Gallons Per Minute

Power Type

Circle one

Diesel Engine Gasoline Engine Natural Gas
Electric Motor Hand Tractor PTO
Windmill Other (specify): _____
Horse Power Rating of Motor: 1

Setting Depth: 70 feet

Number of Stages: 2

Pump Test Data

Date Well Tested: _____
Static Water Level (A): 50 Feet Below Land Surface
Pumping Water Level (B): 60 Feet Below Land Surface
Drawdown [(B) - (A)]: 10 Feet Below Land Surface
Test Pumping Rate: 8 Gallons Per Minute
Duration of Pump Test (minimum 4 hours): 4 hours

Method of Measuring Water Level

Circle one

Air Line Electric Measuring Line Steel Tape
Other (specify): _____
For flowing well, measured shut in head: _____ feet
Well yielded 8 GPM with a drawdown of
10 feet after 1 1/2 hours of pumping

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

Michael R Fryfogel 0408
Print Name of Pump Installer and License No. (if applicable)

Michael R Fryfogel
Signature of Pump Installer

Form: OLWR-SWR-1B (04/08)

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