

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)961-5210
(601)360-0535 (fax)

For Office Use Only:

Well #: E144
Aquifer: _____
E-Log #: _____

County: George
Permit #: _____
Driller: Michael S. Harvard
Date drilling completed: 7-02-2013

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 <small>(Landowner if borehole is not for a water well)</small>	Well or Borehole Location
Owner Name: <u>Kenneth Davis (13019)</u>	Latitude: <u>30°50'33.12N</u> Longitude: <u>88°52'57.34W</u>
Mailing Address: <u>189 Shots McLeod Rd</u>	Method of Lat/Long (check one): Conventional Survey _____
<u>Lucedale</u> <u>MS</u> <u>39452</u>	USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
City State Zip Code	<u>NW</u> <u>1/4 SW</u> <u>1/4</u> , Sec <u>27</u> <u>T25</u> <u>R9W</u>
Telephone No. <u>(601) 947-4192</u>	<u>4.5</u> Miles <u>West</u> of <u>Bennedale</u>
	(Distance) (Direction) (Nearest Town)

Well / Borehole Data
Date drilling started: <u>7-02-2013</u> Date drilling completed: <u>7-02-2013</u> Hole depth: _____ Hole diameter: <u>4.25"</u>
Location of the source of any surface water used for drilling: _____
Method of dosing and volume of Chlorine used in drilling and development: _____
Logs run (circle all applicable): <u>(No log run)</u> Electric Gamma Ray Density Sonic Neutron Other: _____
Name of organization running log(s): _____
Purpose of borehole (circle one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump Seismic Survey Other (describe) <u>Test Hole for Possible Water Well</u>
<i>If drilling is not related to water well construction, skip the remainder of this block</i>
Purpose of Well (circle all applicable): Home Industrial Public Supply Irrigation Fish Culture
Other (describe): _____
If a flowing well, method of flow regulation: Valve _____ Other (describe) _____
Static Water Level: _____ feet [above or below] land surface Date measured: _____ <small>(circle one)</small>
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe): _____
Well depth: _____ Well grouted to a depth of: _____ feet Type of grout (circle one): Neat Cement <u>Bentonite</u> Mix
Casing length: _____ feet Casing diameter: _____ inches Type of casing: _____
Screen length: _____ feet Screen diameter: _____ inches Type of screen: _____
Screen slot size: _____ inches Setting depth: From _____ feet to _____ feet
Type of completion (circle all applicable): Gravel packed Underreamed 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

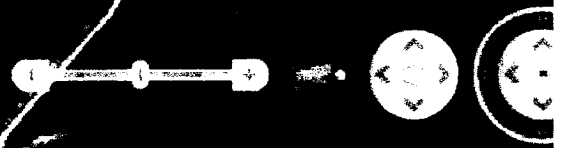
E144

Hunt Rd

13019

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