

Hancock

Never received Part 2 3/13

County: ~~Mississippi~~  
 Permit #: \_\_\_\_\_  
 Driller: Coastwater Well Serv.  
 Date drilling completed: 6-15-10

**State Well Report**  
 Part I

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: A5K  
 Well #: \_\_\_\_\_  
 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>Glen Brister</u>	Latitude: <u>30° 35' 55.3"</u> Longitude: <u>089° 29' 34.7"</u>
Mailing Address: <u>7301 T.C. Whittington</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad <u>Hand-held GPS</u> , Survey-grade GPS
<u>Misspoint, MS 39562</u> City State Zip Code	<u>NW 1/4 SE 1/4 Sec 21 Twn T35 Rng R5W</u>
Telephone No. <u>601 218-9051</u>	Distance <u>1N</u> Miles Direction _____ of Nearest Town <u>Big Point</u>

**Well Data**

Purpose of Well (circle one): ~~Industrial~~ Public Supply Irrigation Fish Culture Other: Whittington's Nursery

Date well drilling started: 6-14-10 Date well drilling completed: 6-15-10

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

Static Water Level: 20 feet above or below (circle one) land surface Date measured: 6-15-10

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

Hole depth: 85 FT. Well depth: 85 FT. Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 65 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 20 feet Screen diameter: 4 inches Type of screen: PVC

Screen slot size: .010 inches Setting depth: From 65 feet to 85 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: N/A 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): N/A

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.

Jack Ridgdell 0-472

Jack Ridgdell

Print Name of Water Well Contractor and License No.

Signature of Water Well Contractor

RECEIVED  
 JUN 15 2010  
 BY: OLMP

