

#106

State Well Report Part 1 - Driller's Log

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)

County: Hancock
 Permit #: _____
 Driller: Garry Lutz
 Date drilling completed: 4-21-08

For Office Use Only:
 Aquifer: _____
 Well #: K-796
 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>Derby Homes</u>	Latitude: <u>30° 17' 51"</u> Longitude: <u>89° 25' 23"</u>
Mailing Address: <u>4758 Leonard Ave</u>	Method of Lat/Long (circle one): <u>31</u> Conventional Survey, <u>50</u>
<u>Lchigh Acres FL 33973</u>	USGS quad, <u>Hand-held GPS</u> Survey-grade GPS
City State Zip Code	<u>6</u> <u>95</u> <u>14W</u>
Telephone No. <u>239 303-3580</u>	Distance Direction Nearest Town
	<u>6</u> Miles <u>W</u> of <u>Wareland</u>

Well / Borehole Data

Date drilling started: 4-21-08 Date drilling completed: 4-21-08 Hole depth: 138 Hole diameter: 7

Location of the source of any surface water used for drilling: Wareland City Water

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 N/A Other (describe) _____

Static Water Level: _____ feet above or below (circle one) land surface Date measured: 4-22-08

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

Well depth: 134 Well grouted to a depth of 10 feet Type of grout (circle one) Neat Cement Bentonite Mix

Casing length: 114 feet Casing diameter: 4 inches Type of casing: PVC

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

Screen slot size: 6 inches Setting depth: From 114 feet to 134 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

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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 #: K-796
Elevation: _____

County: Hancock

Permit #: _____

Driller: Garry Lantz

Date completed: 4-28-08

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: Parby Homes
Mailing Address: 4758 Leonard Blvd
Lehigh Acres FL 33973
City State Zip Code
Telephone No. () _____

Well Location

Latitude: 30.17.514 Longitude: 89.25.834
Method of Lat/Long (check one): Conventional Survey _____
USGS quad Hand-held GPS, Survey-grade GPS _____
____ 1/4 ____ 1/4 Sec ____ T ____ R ____
Distance Direction Nearest Town
6 Miles W of Waveland

Pump Type

Circle one

Air Lift Jet Submersible
Bucket Piston Turbine
Centrifugal Rotary Flowing Well

Other (specify): _____

Date Pump Installed: 6-19-08

Rated Pump Capacity: 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: 1/2

Setting Depth: 60 feet

Number of Stages: 7

Pump Test Data

Date Well Tested: 6-19-08
Static Water Level (A): 10 Feet Below Land Surface
Pumping Water Level (B): 32 Feet Below Land Surface
Drawdown [(B) - (A)]: 22 Feet Below Land Surface
Test Pumping Rate: 20 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 20 GPM with a drawdown of
20 feet after 4 hours of pumping

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

Garry Lantz 0794
Print Name of Pump Installer and License No. (if applicable)

[Signature]
Signature of Pump Installer

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

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