

Part 2 never received 3/13

State Well Report Part 1 - Driller's Log

County: Hancock
 Permit #: _____
 Driller: Garry Lantz
 Date drilling completed: 8-11-08

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 #: K-370
 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.

<p>Information on Well Owner (Landowner if borehole is not for a water well)</p> <p>Owner Name: <u>See of a Southern Home</u> Mailing Address: <u>4053 16th St</u> <u>Bay St Louis MS 39520</u> City State Zip Code Telephone No. () _____</p>	<p>Well or Borehole Location</p> <p>Latitude: <u>30° 19' 43.26"</u> Longitude: <u>89° 23' 71.243"</u> Method of Lat/Long (circle one): <u>Hand-held GPS</u> Conventional Survey, USGS quad, Survey-grade GPS NE ¼ NE ¼ Sec <u>29</u> Twn <u>85</u> Rng <u>14</u> Distance <u>2</u> Miles <u>North</u> Direction of <u>Waveland</u> Nearest Town</p>
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Well / Borehole Data

Date drilling started: 8-11-08 Date drilling completed: 8-11-08 Hole depth: 135 Hole diameter: 2

Location of the source of any surface water used for drilling: Waveland 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: 12 feet above or below (circle one) land surface Date measured: 8-12-08
 Method of Measurement (circle one) steel tape electric tape air line other: _____

Well depth: 130 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix
 Casing length: 110 feet Casing diameter: 2 inches Type of casing: PVC
 Screen length: 20 feet Screen diameter: 2 inches Type of screen: PVC
 Screen slot size: 6 inches Setting depth: From 110 feet to 130 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)

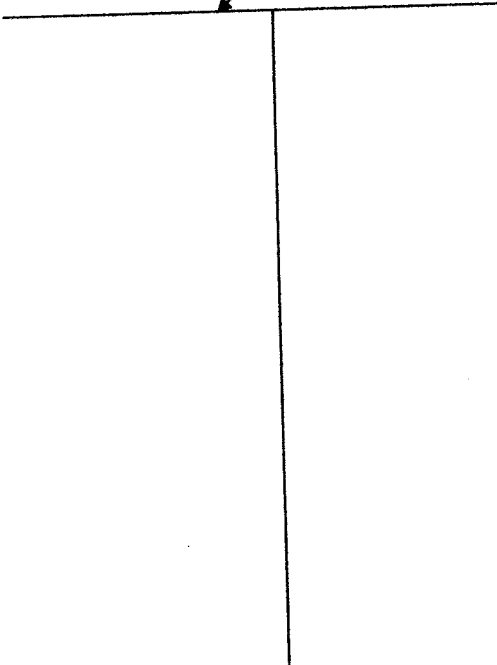
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K 870

The sketch below only required for water wells

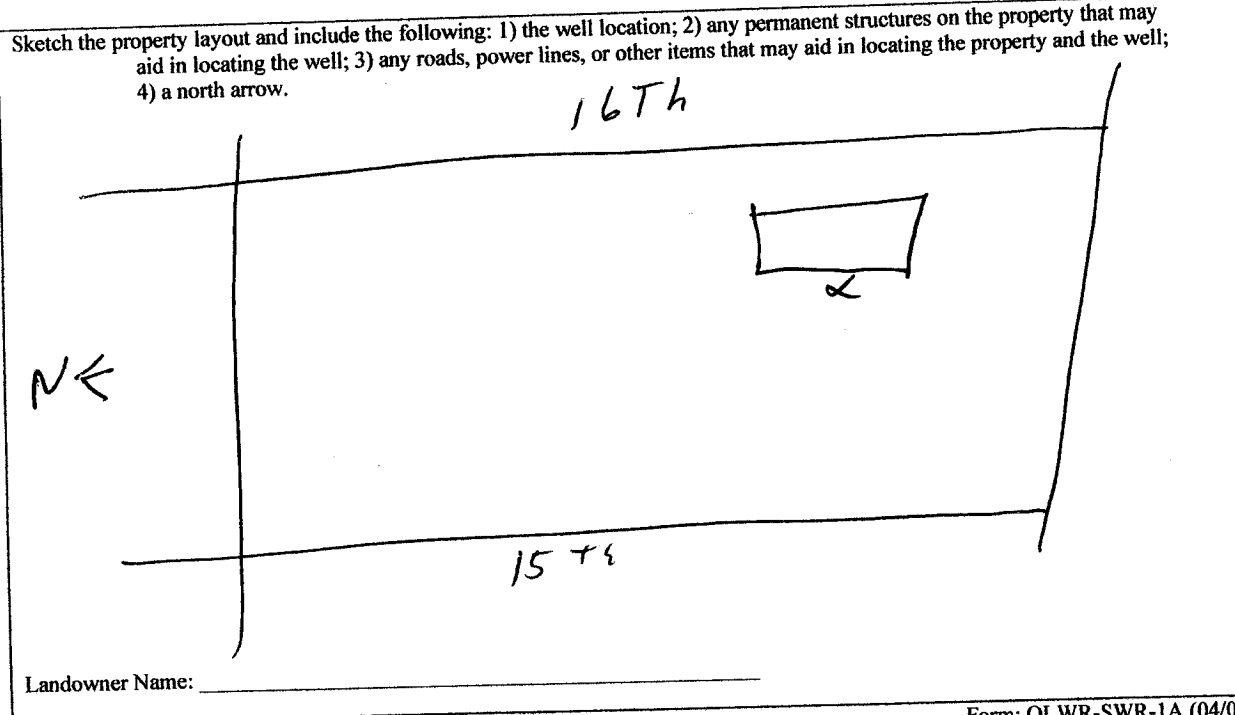
Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

If well telescopes, show depths on sketch.
Ground Level →



Description of Formations Encountered	From (depth)	To (depth)
Clay	Ground Level	10
Sand	10	35
Clay	35	65
Sand	65	80
Clay	80	100
Sand	100	135

If more than one screen, show location of each on sketch



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.

Garry Lutz 0-794 8-19-08
 Print Name of Responsible Licensee and License No. Date

Signature of Licensee

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