

ND PUMP

3

Part 2 never received 3/13

County: HANCOCK
 Permit #: _____
 Driller: SCHULTZ
 Date drilling completed: 6-1-08

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)

For Office Use Only:
 Aquifer: _____
 Well #: K298
 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 <i>(Landowner if borehole is not for a water well)</i> Owner Name: <u>ALAN FORBES FORBES</u> Mailing Address: <u>1713 6276 CORNADA</u> <u>B52 MS 37531</u> City State Zip Code Telephone No: <u>601/214-3248</u></p>	<p>Well or Borehole Location Latitude: <u>30° 17' 38"</u> Longitude: <u>89° 26' 29"</u> Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>Hand-held GPS</u>, Survey-grade GPS <u>NW 1/4 NW 1/4 Sec 6 Twn 9S Rng 14W</u> Distance Direction Nearest Town <u>3</u> Miles <u>W</u> of <u>WAVE LAWN</u></p>
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Well / Borehole Data
 Date drilling started: 6/4/08 Date drilling completed: 6/4/08 Hole depth: 243 Hole diameter: 5"
 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): 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: 6 feet above or below (circle one) land surface Date measured: 6-4-08
 Method of Measurement (circle one) steel tape electric tape air line other: _____
 Well depth: 243 Well grouted to a depth of _____ feet Type of grout (circle one): Neat Cement Bentonite Mix
 Casing length: 223 feet Casing diameter: 2 inches Type of casing: P.V.C.
 Screen length: 20 feet Screen diameter: 2 inches Type of screen: DK
 Screen slot size: DD6 inches Setting depth: From 223 feet to 243 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*

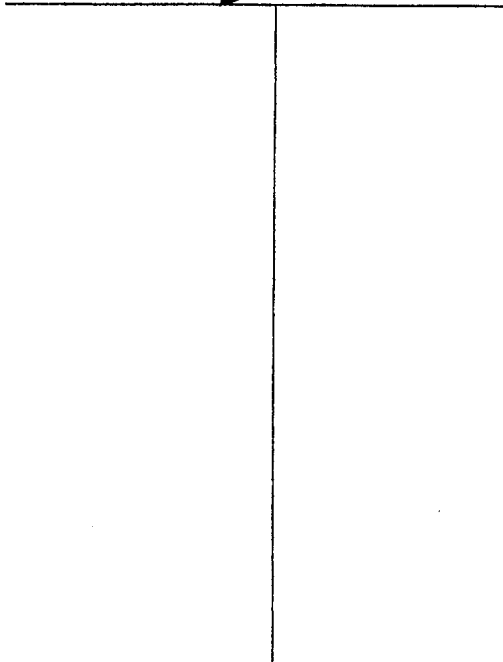
Form: OLWR-SWR-1A

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The sketch below only required for water wells

If well telescopes, show depths on sketch.

Ground Level →

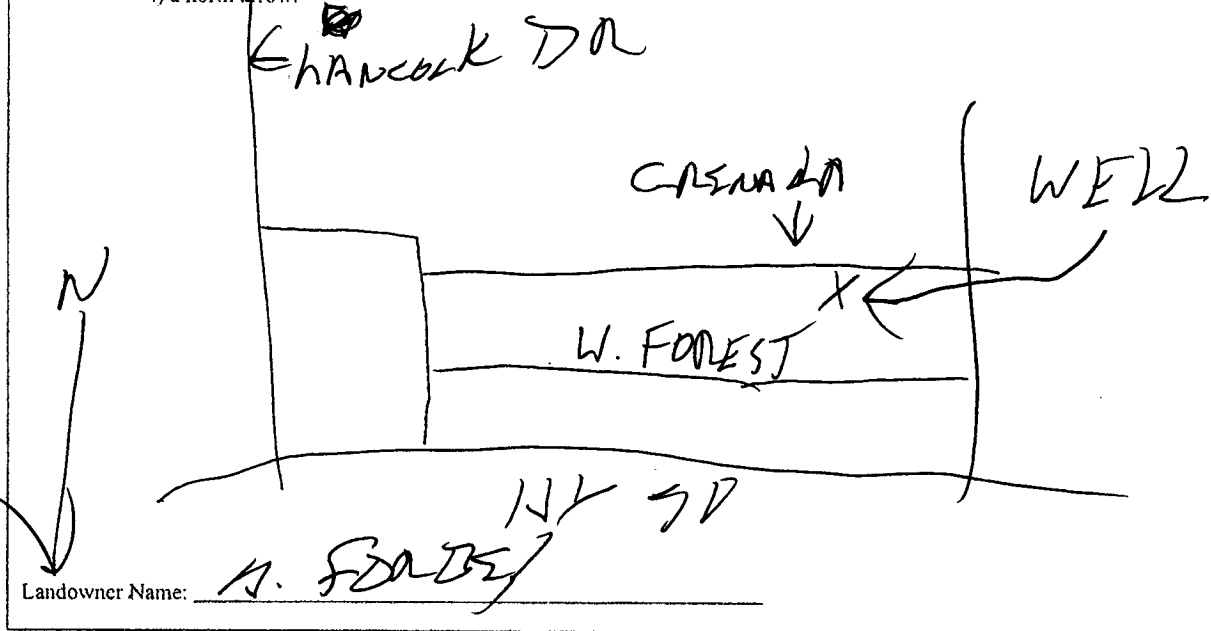


Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth)	To (depth)
SAND	Ground Level	50
CLAY	61	95
SAND	91	130
CLAY	131	200
SAND	211	243

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.



Form: OLWR-SWR-1A

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.

M. SCHULTZ 4707/1/08

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee