

State Well Report  
Part 1

Mississippi Department of Environmental Quality  
Office of Land and Water Resources  
P.O. Box 30691  
Jackson, MS 39289-0691  
(601)961-5210  
(601)354-6938 (fax)

For Office Use Only:

Aquifer:                       
Well #: ~~K-552~~  
L.S. Elevation: M 169  
E-log #:                     

County: Hancock  
Well No: 0239  
Well Name: McGill Pump & Well  
Date drilling completed: 11/24/07

Since 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	
Name: <u>Brenda Lane</u>	Latitude: <u>30° 15' 56"</u>	Longitude: <u>89° 26' 59"</u>	
Home Address: <u>7191 Lower Bay Rd.</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>		
City: <u>BSL MS 39520</u>	USGS quad, Hand-held GPS, Survey-grade GPS		
State: <u>MS</u>	NW <u>1/4</u> NE <u>1/4</u> Sec. <u>13</u> Twp. <u>9S</u> Rng. <u>14W</u>		
Zip Code: <u>39520</u>	Distance: <u>3</u> Miles <u>W</u> of <u>Waveland</u>		
Telephone No: <u>228 493-2797</u>	Municipal Town: <u>Waveland</u>		

Well Data

Purpose of Well (circle one): Home Industrial Public Supply Irrigation Fish Culture Other

Date well drilling started: 11/24/07 Date well drilling completed: 11/24/07

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

Static Water Level: 20 feet above or below (circle one) land surface Date measured: 11/24/07

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

Bole depth: 340' Well depth: 340' Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 340 feet Casing diameter: 2 inches Type of casing: PVC

Screen length: 20 feet Screen diameter: 2 inches Type of screen: PVC

Screen slot size: .0006 inches Setting depth: From 320 feet to 340 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 back of page

Log(s) (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other \_\_\_\_\_

Name of organization running log(s): \_\_\_\_\_

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.

McGill Pump & Well 0239 Michael McGill Sr.  
Print Name of Water Well Contractor and License No. Signature of Water Well Contractor

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BY: OLWR



# STATE WELL REPORT

## Part 2

**Pump Installer's Completion Report**  
 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 #: ~~A-552~~  
 Elevation: M169

County Hancock  
 Permit: 0239  
 Driller: McGill Pump Well  
 DATE completed: 11/24/07

This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump.

Well Owner Information	Well Location
Owner Name: <u>Brenda Lane</u>	Latitude: <u>30-15-56</u> Longitude: <u>89-26-59</u>
Mailing Address: <u>7191 Lower By Rd</u>	Method of Lat/Long (circle one): Conventional Survey,
<u>B.S.L. MS. 391520</u>	USGS quad, Hand-held GPS, Survey-grade GPS
City State Zip Code	<u>NW</u> 1/4 <u>NE</u> 1/4 Sec <u>7</u> Twn <u>9S</u> Rng <u>14W</u>
Telephone No. <u>228 493-2797</u>	Distance Direction <u>13</u> Nearest Town
	<u>3</u> Miles <u>W</u> of <u>Waveland</u>

Pump Type Circle one	Power Type Circle one
Lift <input checked="" type="radio"/> Jet <input type="radio"/> Submersible	Diesel Engine Gasoline Engine Natural Gas
Jet <input type="radio"/> Piston <input type="radio"/> Turbine	<input checked="" type="radio"/> Electric Motor <input type="radio"/> Hand <input type="radio"/> Tractor PTO
Centrifugal <input type="radio"/> Rotary <input type="radio"/> Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>1</u>
Date Pump Installed: <u>11/24/07</u>	Setting Depth: <u>40</u> feet
Rated Pump Capacity: <u>12</u> Gallons Per Minute	Number of Stages: <u>2</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>11/24/07</u>	Air Line <input type="radio"/> Electric Measuring Line <input type="radio"/> <input checked="" type="radio"/> Steel Tape
Static Water Level (A): <u>20</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>40</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>10</u> Feet Below Land Surface	Well yielded <u>12</u> GPM with a drawdown of
Pumping Rate: <u>12</u> Gallons Per Minute	<u>10</u> feet after <u>4</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>4</u> hours	

INSTALLER MUST CERTIFY that the above statements are true to the best of my knowledge.

McGill Pump & Well 0239

Michael P. McGill

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