

County: Harrison  
 Permit #: 0-209  
 Driller: D Mason  
 Date drilling completed: 8/30/06

**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 #: D94  
 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>Beau Rivage Golf Course</u>	Latitude: <u>30° 38.59'</u> Longitude: <u>88.54° 02'</u>
Mailing Address: <u>Clubhouse Well 11 SWP1</u> <u>24400 Hwy 15</u> <u>Savvier MS 39574</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad. Hand-held GPS, Survey-grade GPS <u>SW 1/4 SW 1/4 Sec 133 Twn 24 S Rng 9 W</u>
City: _____ State: _____ Zip Code: _____	Distance: <u>20</u> Miles Direction: <u>North</u> of Nearest Town: <u>D'Iberville</u>
Telephone No. <u>(601) 818-0070 / (601) 374-0291</u>	

**Well / Borehole Data**

Date drilling started: 8/16/06 Date drilling completed: 8/19/06 Hole depth: 475 Hole diameter: 4" x 2"

Location of the source of any surface water used for drilling: Shop

Method of dosing and volume of Chlorine used in drilling and development: 12 lbs per 1000 gal 89% chlorine

Logs run (circle all applicable): No log run  Electric  Gamma Ray  Density  Sonic  Neutron  Visual

Name of organization running logs: N/A

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: Golf Course

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

Static Water Level: 165 feet above or below (circle one) land surface Date measured: 8/30/2006

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

Well depth: 475 Well grouted to a depth of 445 feet Type of grout (circle one)  Neat Cement  Bentonite  Mix

Casing length: 445 feet Casing diameter: 4" x 2" inches Type of casing: Stainless Steel

Screen length: 30 feet Screen diameter: 4" x 2" inches Type of screen: Stainless Steel

Screen slot size: .008 inches Setting depth: From 445 feet to 475 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: 63 feet. *If telescoped or more than one screen, describe on next page*

W.G. Yates / Sons Construction Co 115 New St. Biloxi, MS 39530



# 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)

County: Harrison  
 Permit #: 0-209  
 Driller: D. Mason  
 Date completed: 8/30/2006  
*Copy information from block on Part 1*

**For Office Use Only:**

Aquifer: \_\_\_\_\_  
 Well #: \_\_\_\_\_  
 Elevation: \_\_\_\_\_

*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	Well Location
Owner Name: <u>Bear Ridge Golf Course</u>	Latitude: _____ Longitude: _____
Mailing Address: <u>Clubhouse Well SWPI</u> <u>21400 Hwy 15</u> <u>Sawyer MS 39571</u> City State Zip Code	Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____ Hand-held GPS _____ Survey-grade GPS _____ _____ 1/4 _____ 1/4 Sec: <u>21</u> T. <u>43</u> R. <u>9W</u>
Telephone No. <u>(601) 818 0070 / 228 / 374 0291</u>	Distance Direction Nearest Town <u>20</u> Miles <u>North</u> of <u>D/Beville</u>

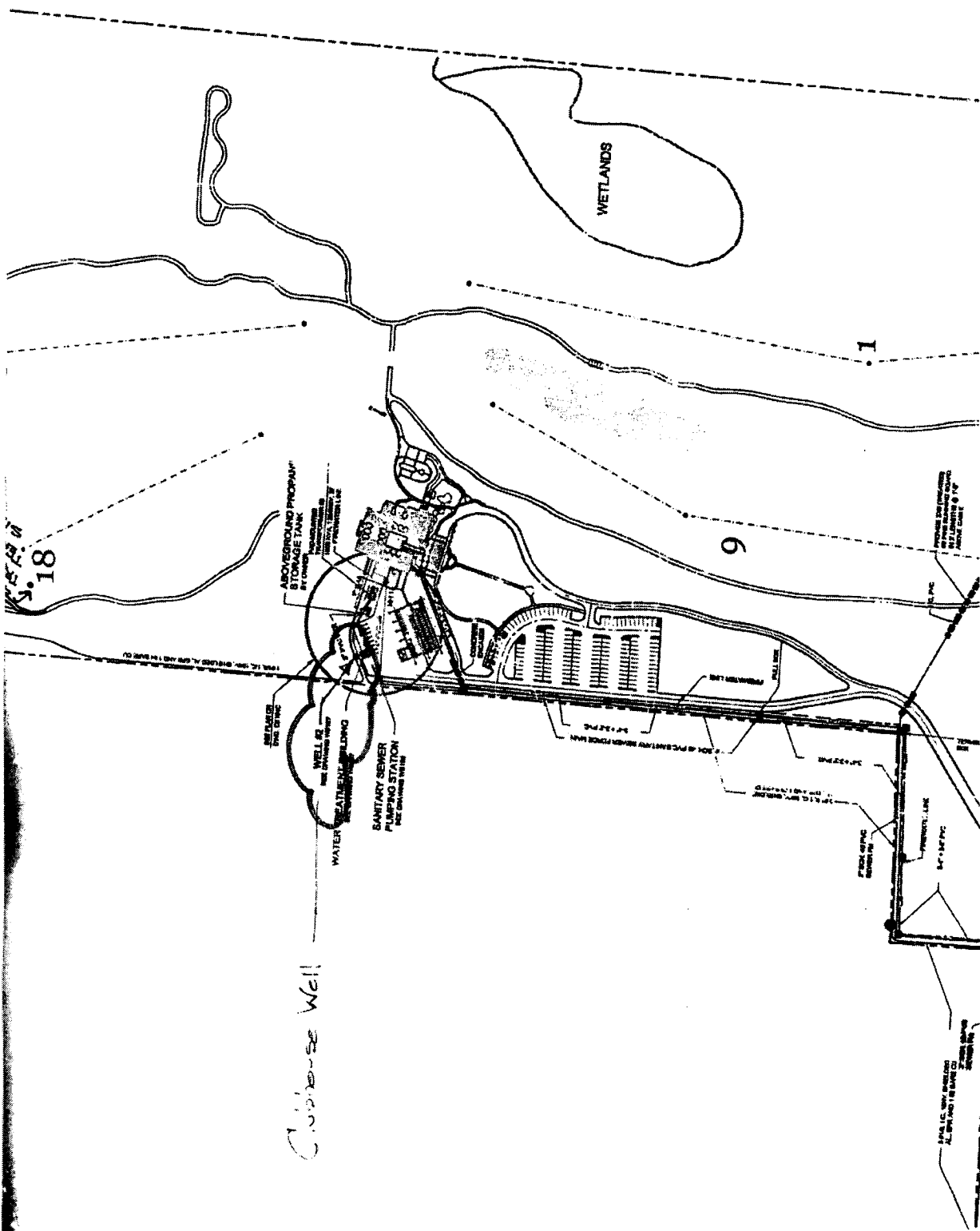
Pump Type Circle one	Power Type Circle one
Air Lift _____ Jet _____ <u>Submersible</u>	Diesel Engine _____ Gasoline Engine _____ Natural Gas _____
Bucket _____ Piston _____ Turbine _____	<u>Electric Motor</u> _____ Hand _____ Tractor PTO _____
Centrifugal _____ Rotary _____ Flowing Well _____	Windmill _____ Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>7.5</u>
Date Pump Installed: <u>8/30/2006</u>	Setting Depth: <u>231</u> feet
Rated Pump Capacity: <u>80</u> Gallons Per Minute	Number of Stages: <u>24</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>9/14/2006</u>	Air Line _____ <u>Electric Measuring Line</u> _____ Steel Tape _____
Static Water Level (A): <u>165</u> Feet Below Land Surface	Other (specify): <u>Plumb bob</u>
Pumping Water Level (B): <u>165</u> Feet Below Land Surface	For flowing well, measured shut in head: <u>N/A</u> feet
Drawdown [(B) - (A)]: <u>0</u> Feet Below Land Surface	Well yielded <u>80</u> GPM with a drawdown of
Test Pumping Rate: <u>80</u> Gallons Per Minute	<u>6</u> feet after <u>1</u> hours of pumping
Duration of Pump Test (minimum 4 hours): <u>1</u> hours	

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

Dwight Mason 0-209      \* Dwight Mason  
 Print Name of Pump Installer and License No. (if applicable)      Signature of Pump Installer

W.G. Yates/Star Construction Co. 115 Main St. B. Box 118 39530



S. 18

Clubhouse Well

WETLANDS

ABOVEGROUND STORAGE TANK  
AT OTHER END OF PROPERTY

RELEASED TO THE PUBLIC

WELL #2  
FOR THE CLUBHOUSE

WATER TREATMENT BUILDING

SANITARY SEWER PLUMBING STATION

9

1

PROPOSED FOR CONSTRUCTION  
BY THE CLUBHOUSE  
FOR THE CLUBHOUSE

8" P.C.

8" P.C.

8" P.C.

8" P.C.

8" P.C. FOR THE CLUBHOUSE  
AT THE END OF THE PROPERTY