

# STATE WELL REPORT

## Part 1

### Driller's Log

Mississippi Department of Environmental Quality  
Office of Land and Water Resources  
P.O. Box 2309  
Jackson, MS 39225-2309  
(601)961-5210  
(601)360-0535 (fax)

### For Office Use Only:

Well #: F523  
Aquifer: \_\_\_\_\_  
E-Log #: \_\_\_\_\_

County: Harrison  
Permit #: 0239  
Driller: Mc Gill pump & well  
Date drilling completed: 12-7-16

*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.*

Well Owner Information <small>(Landowner if borehole is not for a water well)</small>	Well or Borehole Location
Owner Name: <u>Raymond Smiles</u>	Latitude: <u>30° 33' 20.8" N</u> Longitude: <u>89° 12' 25.19" W</u>
Mailing Address: <u>22089 Houston Ladner Rd</u>	Method of Lat/Long (check one): Conventional Survey _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS <input checked="" type="checkbox"/>
<u>Saucier</u> MS <u>39574</u>	USGS quad _____, NE <input checked="" type="checkbox"/> NE <input checked="" type="checkbox"/> Sec <u>5</u> T <u>65</u> R <u>12 W</u>
City State Zip Code	<u>9</u> Miles <u>north</u> of <u>Lyman</u>
Telephone No. <u>(228) 365-2761</u>	(Distance) (Direction) (Nearest Town)

Well / Borehole Data
Date drilling started: <u>12-5-16</u> Date drilling completed: <u>12-7-16</u> Hole depth: <u>500</u> Hole diameter: <u>4x2</u>
Location of the source of any surface water used for drilling: <u>well water</u>
Method of dosing and volume of Chlorine used in drilling and development: <u>N/A</u>
Logs run (circle all applicable): <input checked="" type="checkbox"/> No log run <input type="checkbox"/> Electric <input type="checkbox"/> Gamma Ray <input type="checkbox"/> Density <input type="checkbox"/> Sonic <input type="checkbox"/> Neutron <input type="checkbox"/> Other: _____
Name of organization running log(s): <u>N/A</u>
Purpose of borehole (circle one): <input checked="" type="checkbox"/> Water Well <input type="checkbox"/> Geotechnical/Geological Investigation <input type="checkbox"/> Ground Source Heat Pump <input type="checkbox"/> Seismic Survey <input type="checkbox"/> Other (describe) _____
<i>If drilling is not related to water well construction, skip the remainder of this block</i>
Purpose of Well (circle all applicable): <input checked="" type="checkbox"/> Home <input type="checkbox"/> Industrial <input type="checkbox"/> Public Supply <input type="checkbox"/> Irrigation <input type="checkbox"/> Fish Culture
Other (describe): _____
If a flowing well, method of flow regulation: Valve _____ Other (describe) <u>Back wash valve</u>
Static Water Level: <u>50</u> feet [above or <input checked="" type="checkbox"/> below] land surface Date measured: <u>12-9-16</u>
Method of measurement (circle one): <input checked="" type="checkbox"/> Steel tape <input type="checkbox"/> Electric tape <input type="checkbox"/> Air line <input type="checkbox"/> Other (describe): _____
Well depth: <u>500</u> Well grouted to a depth of: <u>10</u> feet Type of grout (circle one): <input checked="" type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Mix
Casing length: <u>480</u> feet Casing diameter: <u>4x2</u> inches Type of casing: <u>PVC</u>
Screen length: <u>20</u> feet Screen diameter: <u>2</u> inches Type of screen: <u>PVC</u>
Screen slot size: <u>.006</u> inches Setting depth: From <u>480</u> feet to <u>500</u> feet
Type of completion (circle all applicable): Gravel packed <input type="checkbox"/> Underreamed <input type="checkbox"/> Open hole <input checked="" type="checkbox"/> Natural Development
Other (describe): _____
Top of tap pipe or reduction in casing: <u>220</u> feet
<i>If telescoped or more than one screen, describe on next page</i>

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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 39225-2309  
 (601)961-5210  
 (601) 360-0535 (fax)

County: Harrison  
 Permit #: 0239  
 Driller: Mc Gill Pump & Well  
 Date completed: 12-7-16  
*Copy information from block on Part 1*

**For Office Use Only:**

Well #: F523  
 Aquifer: \_\_\_\_\_

*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>Raymond Smiles</u>	Latitude: <u>30°33'20.8"</u> Longitude: <u>89°12'25.19" W</u>
Mailing Address: <u>22089 Houston Ladner Rd</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
<u>Sayler</u> MS <u>39574</u> City State Zip Code	<u>NE 1/4 NE 1/4, Sec 45 T 6 S R 12 W</u>
Telephone No. <u>(228) 365-2761</u>	_____ Miles of _____ (Distance) (Direction) (Nearest Town)

**Pump Type (circle one)**

Submersible  Turbine  Air Lift  Centrifugal  Flowing Well  Jet  Piston  Rotary  Other (describe): \_\_\_\_\_

Date Pump Installed: 12-9-16 Rated Pump Capacity: 20 Gallons Per Minute

Is This Pump (circle one):  New  Repaired  Replacement

**Power Type (circle one)**

Electric  Diesel  Gasoline  Natural Gas  Tractor PTO  Windmill  Other (describe): \_\_\_\_\_

Horse Power Rating of Motor: 1 h.p. Setting Depth: 100 feet Number of Stages: 9

**Pump Test Data for Non Flowing Well**

Date Well Tested: 12-7-16 Duration of Pump Test (minimum 4 hours): 4 hours

Static Water Level (A): 50 Feet Below Land Surface Pumping Water Level (B): 100 Feet Below Land Surface

Drawdown [(B) - (A)]: 10 Feet Below Land Surface Test Pumping Rate: 40 Gallons Per Minute

Method of measurement (circle one):  Steel tape  Electric tape  Air line  Other (describe): \_\_\_\_\_

**Pump Test Data for Flowing Well** NA

Measured shut in head: \_\_\_\_\_ feet.

Well yielded \_\_\_\_\_ GPM with a drawdown of \_\_\_\_\_ feet after \_\_\_\_\_ hours of pumping

**Meter Installation** NA

Meter Manufacturer: \_\_\_\_\_ Meter Serial Number: \_\_\_\_\_

Meter Model Number/Name: \_\_\_\_\_ Type of Meter: \_\_\_\_\_

Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): \_\_\_\_\_

Installation Date: \_\_\_\_\_ Meter installed by: \_\_\_\_\_

Is This Meter (circle one):  New  Repaired  Replacement

*Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.*

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

Michael Mc Gill #0239 12/12/16 \_\_\_\_\_  
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer

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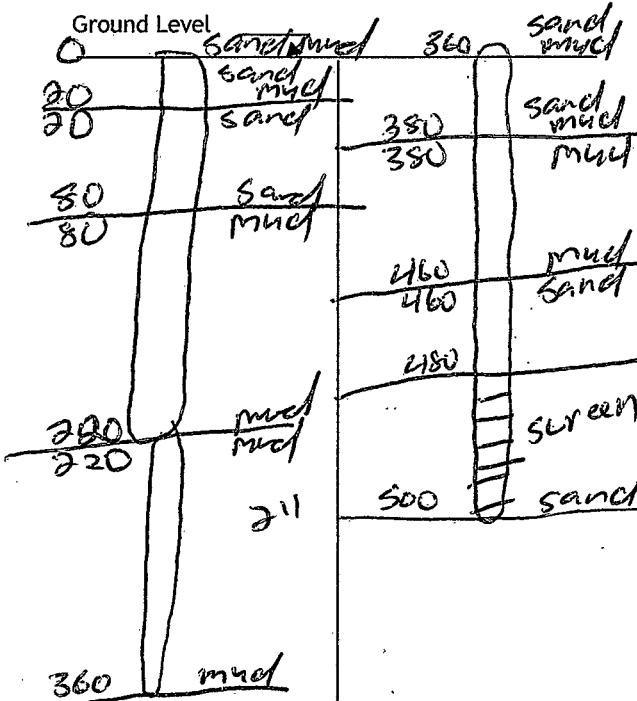
County: Itarrison  
 Permit #: 0239

For Office Use Only:  
 Well #: F523

*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.*



Description of Formations Encountered	From (depth) To (depth)	
	Ground level	
sand/mud	0	20
sand	20	80
mud	80	360
mud/sand	360	380
mud	380	460
sand	460	500

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) north arrow

See Back  
 page

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Landowner Name: Raymond smiles

I HEREBY 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.

Michelle Mehrl 240239    12/12/16    MM  
 Print Name of Responsible Licensee and License No.    Date    Signature of Licensee

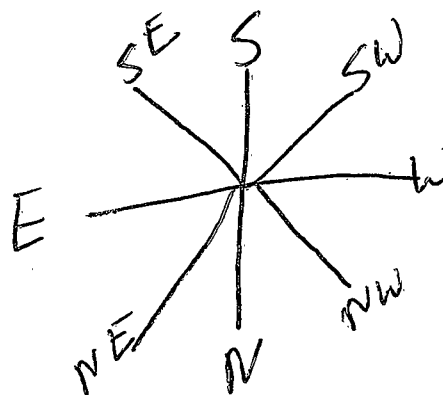
Sayler Lizana Rd

Ty Valley Dr

Houston Ladner Rd

22089  
Houston  
Ladner  
Rd

Julius Cuevas Rd



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