

State Well Report

Part 1 - Driller's Log

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)

County: Harrison 047
Permit #: NA
Driller: Lyman Well
Date drilling completed: 11/20/2014

For Office Use Only:
Aquifer: G551
Well #: _____
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>MDOT</u>	Latitude: <u>30-31-44.07</u> Longitude: <u>89-06-43.98</u>
Mailing Address: <u>16499-B Saucier</u> <u>Hwy 419</u> <u>Saucier MS 39574-9740</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>
City: _____ State: _____ Zip Code: _____	USGS quad: <u>NW 1/4 11W Sec 17 Twn 65 Rng 11W</u>
Telephone No. <u>(228) 832-0682</u>	Distance _____ Miles _____ of _____

Well / Borehole Data

Date drilling started: 11/14/2014 Date drilling completed: 11/20/2014 Hole depth: 860 Hole diameter: 7 7/8

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

Method of dosing and volume of Chlorine used in drilling and development: Granules

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

Name of organization running log(s): Tedco

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: Test well for GW 17126

If a flowing well, method of flow regulation: Valve _____ Other (describe) _____

Static Water Level: 23 feet above or below (circle one) land surface Date measured: 12/8/2014

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

Well depth: 855 Well grouted to a depth of 15 feet Type of grout (circle one): Neat Cement _____ Bentonite Mix _____

Casing length: 815 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 40 feet Screen diameter: 4 inches Type of screen: Saw

Screen slot size: .008 inches Setting depth: From 815 feet to 855 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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G 551

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	30
Clay	30	240
Sand	240	270
Clay	270	300
Coarse Sand	300	390
Clay	390	410
Sand	410	440
Clay	440	700
Sand	700	718
Clay	718	805
Sand	805	855
Clay	855	860

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.

See Map

Landowner Name: _____

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.

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Print Name of Responsible Licensee and License No. _____

Date _____

Signature of Licensee _____