State Well Report

Part 1

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 #:
Driller: Coast Water Well Serv.
Date drilling completed: 9/29/11

For Office Use Only:
Aquifer:
Well #: 116-00
L. S. Elevation:
E-log #:

State 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

Owner Name: Dean Fletcher
Mailing Address: 15385 Karen Rd.
Biloxi, MS 39532
City State Zip Code
Telephone No. 228 861-2430

Well Location

Latitude: 30 . 30 . 41.76 Longitude: 088 57 36.66
Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
NE ¼ ~~NW~~ ¼ Sec 23 Twn T65 Rng R10W
Distance 6 Miles Direction NNW of Nearest Town D'Iberville

Well Data

Purpose of Well (circle one): Home Industrial Public Supply Irrigation Fish Culture Other:
Date well drilling started: 9/26/11 Date well drilling completed: 9/29/11
If flowing, method of flow regulation: Valve N/A Other (describe)
Static Water Level: 100 feet above or below (circle one) land surface Date measured: 9/29/11
Method of Measurement (circle one) steel tape electric tape air line other:
Hole depth: 700 FT Well depth: 700 FT. Well grouted to a depth of 10 feet
Type of grout (circle one): Cement Bentonite Mix
Casing length: 420' X 2" PVC 260' X 4" PVC feet Casing diameter: 4" X 2" inches Type of casing: PVC
Screen length: 20 feet Screen diameter: 2 inches Type of screen: PVC
Screen slot size: .006 inches Setting depth: From 680 feet to 700 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: N/A feet. If telescoped or more than one screen, describe on back of page
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:
Name of organization running log(s): N/A

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.

Jack Ridgdell 0-42
Print Name of Water Well Contractor and License No.

Jack Ridgdell
Signature of Water Well Contractor

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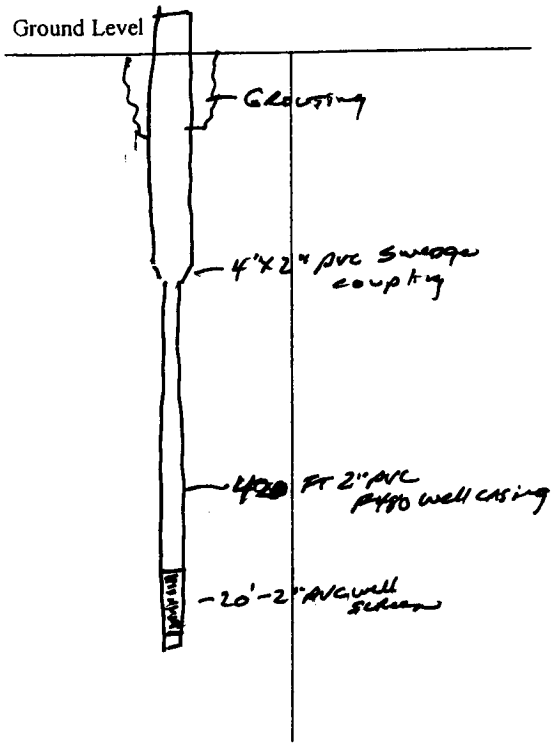
H6-00

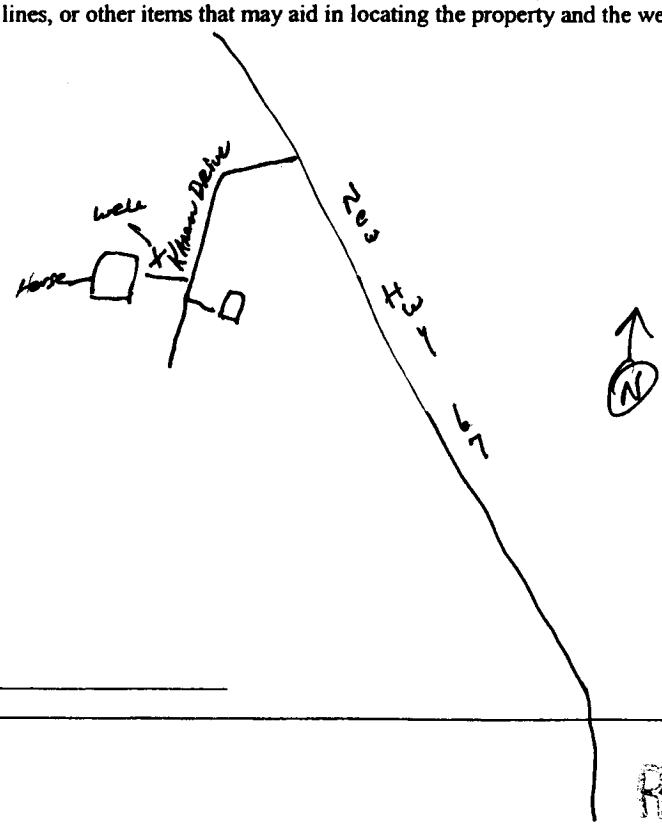
If well telescopes please sketch below and show depths.



Description of Formations Encountered	From	To
Top Soil	0	2
Orange Clay w/ streaks of sand	2	30
Blue Clay	30	130
Brown Coarse Sand	130	140
Blue Clay w/ streaks of sand	140	656
Gray Medium to Coarse Sand	656	700

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) indicate direction.



Landowner Name: Dean Fletcher

Signature of Water Well Contractor

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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 10631
Jackson, MS 39289-0631
(601) 961-5210
(601) 354-6938 (fax)

County: Harrison
Permit #:
Driller: Coast Water Well Srv.
Date completed: 9/29/11

For Office Use Only:
Aquifer:
Well #: H600
Elevation:

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

Owner Name: Dean Fletcher
Mailing Address: 15385 Karen Rd.
Biloxi, MS 39532
City State Zip Code
Telephone No. 228) 861-2430

Well Location

Latitude: 30°30'41.76" Longitude: 088°57'36.66"
Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS
NE ¼ NW ¼ Sec 23 Twn T6S Rng R10W
Distance Direction Nearest Town
6 Miles NNW of D'Iberville

Pump Type
Circle one

Air Lift, Jet, Submersible, Bucket, Piston, Turbine, Centrifugal, Rotary, Flowing Well
Other (specify):
Date Pump Installed: 9/30/11
Rated Pump Capacity: 10 Gallons Per Minute

Power Type
Circle one

Diesel Engine, Gasoline Engine, Natural Gas, Electric Motor, Hand, Tractor PTO, Windmill, Other (specify):
Horse Power Rating of Motor: 1 HP
Setting Depth: 160FT Drop Pipe feet
Number of Stages: 12

Pump Test Data

Date Well Tested: 9/30/11
Static Water Level (A): 100 Feet Below Land Surface
Pumping Water Level (B): N/A Feet Below Land Surface
Drawdown [(B) – (A)]: N/A Feet Below Land Surface
Test Pumping Rate: 12 Gallons Per Minute
Duration of Pump Test (minimum 4 hours): 4 hours

Method of Measuring Water Level
Circle one

Air Line, Electric Measuring Line, Steel Tape
Other (specify):
For flowing well, measured shut in head: N/A feet
Well yielded 22 GPM with a drawdown of N/A feet after N/A hours of pumping

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

Jack Ridgdell 0-472
Print Name of Pump Installer and License No. (if applicable)

Signature of Pump Installer

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