County Harrison Part 1 County Harrison Part 1 Primit & Online (Deck Huld + County) Mississippi Department of Environmental Quality Deline County Harrison Part 1 Mississippi Department of Environmental Quality Well # Well # Date drilling completed: State Law requires that this report be prepared by the driller in detail and filed with the Department within 10 days of completion of drilling of the well. Well Over: Well Over: Well Over: Hor Bornation Well Over: Well Over: Well Over: Hor Bornation Well Over: Well Over: Well Over: Hor Bornation Well Over: Mailing Address: Touph (Mailing Address: Touph (Mailing Address: Touph (Mailing Address: Dispect Touph (Mailing Address: Touph (Mailing Address: Toum (Gestride) Net Not (Sectro) State Zip Code State Zip Code Dispect Net Not (Sectro) Net Not (Sectro) Purpose of Well (circle one (Home) Industrial Public Supply Irigation File Cutic (Sectro) Net Not (Sectro) State Sintel Supply	State Well Report						
Permit *	County: Harrison	Part 1 For Office Use Only:					
Define back Well Well SRV P.O. Box 10631 Well #	Mississippi De						
Date drilling completed: Date with this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well. Evention: Bate drilling completed: Date well of drilling of the well. Bit drilling completed: Diag &		Well #					
(601) 354-6938 (fax) 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 Cocation District Completion of Cocation Well Cocation Net well colspan="2">Well Cocation Well Cocation Net well colspan="2">Well Cocation Well Cocation Well Cocation Well Cocation <td colsp<="" td=""><td>Jac</td><td></td></td>	<td>Jac</td> <td></td>	Jac					
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 Amonda Waltman Mailing Address: TOUMEY Rd. Well Location Well Location Mailing Address: TOUMEY Rd. Well Dyit Ms. 39522 City State Zip Code Diffective State Zip Code Telephone No. (208) 354-84.36 Well Data Well Data Propose of Well (circle one) Industrial Public Supply Date well drilling started: 5/21/12 Job Charler Well Data Propose of Well (circle one) Industrial Public Supply Industrial Public Supply Industrial Public Supply Well Data Propose of Well (circle one) to the regulation: Valve MA Other well drilling completed: 5/32/12 If Rowing, method of flow regulation: Valve MA Other (describe) <td></td> <td>• •</td>		• •					
30 days of completion of drilling of the well. Well Ware Information Well Ware Information Well Location Owner Name AMONDA WAI HYAAN Haitude: 3D: 3D & MA " Longitude: BP: D: 1554 Mailing Address: TOWNOR MAL. Well Data Well Location Ware Name AMONDA WAI HYAAN Latitude: 3D: 3D & MA " Longitude: BP: D: 1554 Mailing Address: TOWNOR MAL. Well Data USGS quad, fand-held GPS Survey-grade GPS Well Data Distance Purpose of Well (circle one) Nearest Town Date well drilling started: 5/21/12 Date well drilling completed: 5/22/12 If flowing, method of flow regulation: Valve N/A Other (describe) Date well drilling completed: Static Ware Level: 120 feet above oncleow circle one) hand surface Method of Measurement (circle one): State Bentonite Mix Casing length: 4711 feet Casing diameter: ainches State Green is string depth: From 4711 feet to State Green is string depth: From 4711 feet to 4977 Streen length: 0 feet Streen	(001) 354-0438 (IAX)						
Weil Owner Name Amonda Walt man Weil Location Owner Name Amonda Walt man Latitude: 30:30:47Å " Longitude: 07:00:1554 Mailing Address: TDWNC MAL. Weil State Zip Code Distance Owner Name Amonda Walt man Bailing Address: TDWNC Mal. Weil State Zip Code Distance State Zip Code Distance Weil Data New Sec. State Purpose of Well (circle one Home) Industrial Purpose of Well (circle one) Industrial Static Water Level: JAO Difference Industrial Purpose of Well (circle one): State Static Water Level: JAO Method of Measurement (circle one): Method of Measurement (circle one): Static Water Level: JAO feet tape							
Mailing Address: TDWD KY Pd Mailing Address: TDWD KY Pd Wethod of Lat/Long (circle one): Conventional Survey, USGS quad, filand-held GPS Survey-grade GPS M: N SE N Sec S Twit 6 S Rng Now Method of Lat/Long (circle one): Telephone No. @88) 334-8636 Well Data Well Data Well Data Purpose of Well (circle one) Industrial Public Supply Irrigation Fish Culture Other: Date well drilling started: 5/31/12 Date well drilling completed: 5/32/12 If Rowing, method of flow regulation: Valve N/A Other (describe) Static Water Level: 120 feet above or below (circle one) land surface Date measured: 5/32/12 Method of Measurement (circle one) steel tape electric tape inches Type of grout (circle one): Cenent Bentonite Mix Casing length: 4711 feet Casing diameter: a inches Type of casing: PVC Screen length: 20 feet Screen diameter: a							
USGS quad, franci-held GPS Survey-grade GPS Dit DK1 + MS 39532 City State Zip Code Telephone No. (2028) 334-8636 Well Data Purpose of Well (circle one Home Industrial Public Supply Inrigation Fish Culture Other:	Owner Name Amanda Waltman	Latitude: <u>30° 37, '6,72</u> " Longitude: <u>089° 00, 15.54</u>					
$\begin{array}{c} \begin{array}{c} \begin{array}{c} \begin{array}{c} \begin{array}{c} \begin{array}{c} \begin{array}{c} \begin{array}{c} $	Mailing Address: TOWNEY Kd.	Method of Lat/Long (circle one): Conventional Survey,					
City State Zip Code Distance Direction Nearest Town Telephone No. (2008) 324-8636 Well Data Purpose of Well (circle one Home Industrial Public Supply Irrigation Fish Culture Other: Date well drilling started: 5/21/12 Date well drilling completed: 5/22/12 If flowing, method of flow regulation: Valve N/A Other (describe) Static Water Level: 1320 feet above of felow circle one) land surface Date measured: 5/22/12 Method of Measurement (circle one) steel tape electric tape air line other:	USGS quad, Hand-held GPS Survey-grade GPS						
Telephone No. (208) 204-86 02 7_Miles NNW ofEi / 0 × i Well Data Purpose of Well (circle one Home Industrial Public Supply Irrigation Fish Culture Other:	Diloxi, MS 39532 City State Zip Cod	$\frac{NE \frac{1}{5E \frac{5}{4}} \operatorname{Sec} \frac{8 \sqrt{1} \operatorname{Twn} \overline{165} \operatorname{Rng} \frac{R}{10w}}{1}}{1}$					
Purpose of Well (circle one Home Industrial Public Supply Irrigation Fish Culture Other:	Telephone No. (228) 3548636	Distance Direction Nearest Town Miles					
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If flowing, method of flow regulation: Valve N/A Other (describe)	\frown						
If flowing, method of flow regulation: Valve N/A Other (describe)							
Method of Measurement (circle one) steel tape electric tape air line other:							
Hole depth: 491 FT Well grouted to a depth of 10 feet Type of grout (circle one): Cernent Bentonite Mix Casing length: 4771 feet Casing diameter: 2 inches Type of casing: IVC Screen length: 20 feet Screen diameter: 2 inches Type of screen: PVC Screen length: 20 feet Screen diameter: 4771 feet to 4977 feet Screen slot size: . <							
Type of grout (circle one): Cernent Bentonite Mix Casing length: 4771 feet Casing diameter: 2 inches Type of casing: PVC Screen length: 20 feet Screen diameter: 2 inches Type of screen: PVC Screen length: 20 feet Screen diameter: 2 inches Type of screen: PVC Screen slot size: ,006 inches Setting depth: From 4771 feet to 4977 feet Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe):	Method of Measurement (circle one) steel tape electric tape (air line), other:						
Casing length:	Hole depth: 497 FT Well depth: 49-	FT Well grouted to a depth of <u>10</u> feet					
Screen length: <u>20</u> feet Screen diameter: <u>A</u> inches Type of screen: <u>PVC</u> Screen slot size: <u>006</u> inches Setting depth: From <u>4771</u> feet to <u>4977</u> feet Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole <u>Natural Development</u> Other (describe): <u>Construction in casing: N/A</u> 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: <u>Name of organization running log(s): N/A</u> 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. <u>JACK BidgellO-4752</u> <u>RECEIVED</u> <u>Mathematications</u> <u>Mathematications</u> <u>Mathematication</u> <u>Name of Water Well Constructed and Linear No.</u>	Type of grout (circle one): Cement Bentonite Mix						
Screen slot size:	Casing length: <u>477</u> feet Casing diameter: <u>2</u> inches Type of casing: <u>PVO</u>						
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe): Top of lap pipe or reduction in casing: M/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:	Screen length: 20 feet Screen diameter: 2 inches Type of screen: $\rho_V C$						
Other (describe):	Screen slot size: ,006 inches Setting depth: From 477 feet to 497 feet						
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 Ridgell 0-4 RECEIVED	Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development						
Logs run (circle all applicable). No log run Electric Gamma Ray Density Sonic Neutron Other:	Other (describe):						
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 Ridgell 0-472 RECEIVED July Kithell Print Name of Water Well Contention and Linear No.	Top of lap pipe or reduction in casing: $\frac{N/A}{2}$ feet. If telescoped or more than one screen, describe on back of page						
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 Ridgdll 0-472 RECEIVED July Kither	Logs run (circle all applicable), No log run Electric Gamma Ray Density Sonic Neutron Other:						
Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws. Jack Ridgdell 0-472 RECEIVED July Kither Market Contractor and Linear No.							
Jack Ridgdell 0-472 RECEIVED Jule Rechter							
Print Name of Water Well Contractor and License No	Jack Ridgdell 0-472	RECEIVED June Kishell					

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BY: OLWR

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If well telescopes please sketch below and show depths.

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If more than one screen, show location of each on sketch etch the property layout and include the following: 1) the well lobation; 2) any permanent structures on the property that may add in locating the well; 3) my roads, power lines, or other items that may aid in locating the property and the sett: 4) indicate direction.	Ground Level	Description of Formations Encour	ntered	From	To
If more than one screen, show location of each on sketch the formation of each on sketch the formation of each on sketch the following: 1) the well location: 2) any permanent structures on the property that may add in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and the sect: 4) indicate direction.		Top Soil	• .		18
If more than one screen, show location of each on sketch tech the property layout and include the following: 1) the well location: 2) my 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 that may aid include the following: 1) the well location: 2) my permanent structures on the property that may aid include the following: 1) the well location: 2) my permanent structures on the property that may aid include the following: 1) the well location: 20 my permanent structures on the property that may aid include the following: 1) the well location: 20 my permanent structures on the property that may aid include the following: 1) the well location: 20 my permanent structures on the property that may aid include the following: 1) the well location: 20 my permanent structures on the property that may aid include the following: 1) the well location: 20 my permanent structures on the property and the welt 4) miletate direction.		Orange Coartse Sand	+ Plagrave	18	iõ0
If more than one screen, show location of each on sketch etch the property layout and include the following: 1) the well location; 2) any permanent structures on the property that may as in locating the eproperty and the well: 4) indicate direction.		Orange Clay		65	424
If more than one screen, show location of each on sketch eich the property layout and include the following: 1) the well location; 2) any permanent structures on the property that may side in locating the well; 3) any roads, power lines, or other items that may aid in locating the well; 4) indicate direction.		Grav Coarse Sandw/pu	agravel	424	197
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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.	If more than one screen, show location of each on sketch				
RECEIVED JUN 2 0 2012	L (va		, ALOG		
Signature of Water Well Contractor JUN 2 0 2012	andowner Name: <u>Amanda Waltman</u>				
Signature of Water Well Contractor		RECEIVED			
Signature of Water Well Contractor	lik lier				
Lewis Printing - Pascagoula MS	Signature of Water Well Contractor	JUN 2 U 2012			
		BY: OLWR	Lewis Printing	g - Pascagou	ula, MS

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STATE WELL REPORT					
County: Harrison Pump Installer ³ Permit #: Mississippi Department Driller: OCH WATEY WELLSRV. Jackson, M Date completed: 5-22-12- (601) 3	art 2 For Office Use Only: s Completion Report Aquifer: and Water Resources				
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: Amanda Waltman	Latitude: 30 32 6.72 Longitude: 089" 00 15.54				
Mailing Address: Townley Rd.	Method of Lat/Long (circle one): Conventional Survey,				
	USGS quad, Hand-held GPS, Survey-grade GPS				
Biloxi, MS 39532	NE 1/2 SE 1/2 Sec 8 TWNT65 Rng RIDW				
City State Zip Code	Distance Direction Nearest Town				
Telephone No. (258 324 - 8636	Miles NNW of Biloxi				
Pump Type Circle one	Power Type Circle one				
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas				
Bucket Piston Turbine	Electric Motor Hand Tractor PTO				
Centrifugal Rotary Flowing Well	Windmill Other (specify):				
Other (specify):	Horse Power Rating of Motor: 24				
Date Pump Installed:5/23/12	Setting Depth: 130FT Drop Pipeteet				
Rated Pump Capacity: Gallons Per Minute	Number of Stages: <u>3</u> RECEIVED				
Pump Test Data	Method of Measuring Water Level JUN 2 0 2012				
Date Well Tested: 5 3 12	Circle one Air Line Electric Measuring Line See LapeOLWB				
Static Water Level (A): 120 Feet Below Land Surface					
Pumping Water Level (B):Feet Below Land Surface	Other (specify):				
Drawdown [(B) - (A)]:Feet Below Land Surface	For flowing well, measured shut in head:feet				
Test Pumping Rate: Gallons Per Minute	Well yielded GPM with a drawdown of				
Duration of Pump Test (minimum 4 hours):	NA feet after NA hours of pumping				
I HEREBY CERTIFY that the above statements are true to the best of my knowledge. <u>Tock Ridgdell</u> 0-472 Print Name of Pump Installer and License No. (if applicable) <u>Signature of Pump Installer</u>					

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