

County: Harrison
 Permit #: 0239
 Driller: Mike McNeil
 Date drilling completed: 3/11/13

**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 #: J405
 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.

<p>Information on Well Owner (Landowner if borehole is not for a water well)</p> <p>Owner Name: <u>Garion Gailen Homes</u> Mailing Address: <u>Lot 48</u> <u>Pass Christian, MS 39571</u> City State Zip Code Telephone No. <u>(228) 206-4223</u></p>	<p>Well or Borehole Location</p> <p>Latitude: <u>30° 23' 36"</u> Longitude: <u>89° 16' 08"</u> Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS <u>1R 1/4 SW 1/4 Sec 35 Twn 7° Rng 13W</u> Distance Direction Nearest Town <u>4</u> Miles <u>N</u> of <u>Delisle</u></p>
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Well / Borehole Data

Date drilling started: 8-4-13 Date drilling completed: 3-11-13 Hole depth: 500 Hole diameter: 4x2
 Location of the source of any surface water used for drilling: water well
 Method of dosing and volume of Chlorine used in drilling and development: _____
 Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: _____
 Name of organization running log(s): _____
 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: _____
 If a flowing well, method of flow regulation: Valve backwash Other (describe) _____
 Static Water Level: 80 feet above or below (circle one) land surface Date measured: 8-4-13
 Method of Measurement (circle one) steel tape electric tape air line other: _____
 Well depth: 500 Well grouted to a depth of _____ feet Type of grout (circle one): Neat Cement Bentonite Mix
 Casing length: 480 feet Casing diameter: 2" inches Type of casing: PVC
 Screen length: 20' feet Screen diameter: 2" inches Type of screen: PVC
 Screen slot size: .0006 inches Setting depth: From 480 feet to 500 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*

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 #: 0234
 Driller: Mike McCall
 Date completed: 3/10/12
Copy information from block on Part 1

For Office Use Only:

Aquifer: _____
 Well #: J405
 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>Carleen Homes</u> Mailing Address: <u>Lot 48</u> <u>Pass Christian, MS 39451</u> <small>City State Zip Code</small> Telephone No. <u>(228) 226-6223</u> ²²⁸ <u>228-1946</u>	Latitude: <u>30-23-36</u> Longitude: <u>89-16-08</u> Method of Lat/Long (check one): Conventional Survey _____ USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____ <u>12</u> $\frac{1}{4}$ SW $\frac{1}{4}$ Sec <u>35</u> T <u>70</u> R <u>13 W</u> Distance Direction Nearest Town <u>4</u> Miles <u>N</u> of <u>DeLisle</u>

Pump Type Circle one	Power Type Circle one
Air Lift: <input checked="" type="radio"/> Jet <input type="radio"/> Submersible Bucket: <input type="radio"/> Piston <input type="radio"/> Turbine Centrifugal: <input type="radio"/> Rotary <input type="radio"/> Flowing Well Other (specify): _____ Date Pump Installed: <u>3-6-13</u> Rated Pump Capacity: <u>12</u> Gallons Per Minute	Diesel Engine <input type="radio"/> Gasoline Engine <input type="radio"/> Natural Gas <input type="radio"/> <input checked="" type="radio"/> Electric Motor <input type="radio"/> Hand <input type="radio"/> Tractor PTO Windmill <input type="radio"/> Other (specify): _____ Horse Power Rating of Motor: <u>1</u> Setting Depth: <u>100/120</u> feet Number of Stages: <u>8</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>8-2-13</u> Static Water Level (A): <u>80</u> Feet Below Land Surface Pumping Water Level (B): <u>100</u> Feet Below Land Surface Drawdown [(B) - (A)]: <u>10</u> Feet Below Land Surface Test Pumping Rate: <u>10</u> Gallons Per Minute Duration of Pump Test (minimum 4 hours): <u>4</u> hours	Air Line <input type="radio"/> Electric Measuring Line <input type="radio"/> <input checked="" type="radio"/> Steel Tape Other (specify): _____ For flowing well, measured shut in head: <u>1</u> feet Well yielded <u>10</u> GPM with a drawdown of <u>10</u> feet after <u>4</u> hours of pumping