

State Well Report

Part I - 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)

County: Harrison
Permit #: 0229
Driller: Mike McMill
Date drilling completed: 03/01/13

For Office Use Only:
Aquifer: _____
Well #: J406
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>Garion Homes</u> Mailing Address: <u>Lot 20</u> <u>Pass Christian, MS 39570</u> City State Zip Code Telephone No. <u>(728) 200-6223</u>	Latitude: <u>30° 23' 30"</u> Longitude: <u>89° 16' 20"</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 7S Rng 13W</u> Distance <u>4</u> Miles <u>N</u> of <u>Dehuslo</u>

Well/Borehole Data
Date drilling started: 9/7/13 Date drilling completed: 9/8/13 Hole depth: 500 Hole diameter: 2"
Location of the source of any surface water used for drilling: 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 _____ Other (describe) _____
Static Water Level: 80 feet above or below (circle one) land surface Date measured: _____
Method of Measurement (circle one) steel tape electric tape air line other: _____
Well depth: 500 Well grouted to a depth of 10 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*

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

Ground Level 

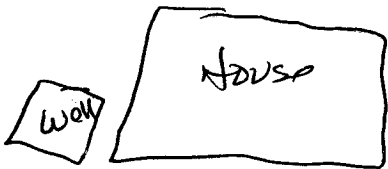
200' 4" TOP
300' 2" BOTTOM

Description of Formations Encountered	From (depth)	To (depth)
Mud	Ground Level	120
Sand	120	140
Mud	140	360
Sand	360	390
Mud	390	460
Sand	460	500

J 406

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.



Landowner Name: Garvin Harris (Lot 20)

Form: OLWR-SWR-1A

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.

Michael McGill 0239 03/18/14 Michael McGill
 Print Name of Responsible Licensee and License No. Date Signature of Licensee

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)

For Office Use Only:

Aquifer: _____
 Well #: J406
 Elevation: _____

County: Harris Co
 Permit #: 0239
 Driller: McGill Pump & Well
 Date completed: 03/08/13
Copy information from block on Part 1

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

Owner Name: Gordon Homes
 Mailing Address: Lot #20
(Magnolia Walk)
Pass Christian, MS 39570
City State Zip Code
 Telephone No. (228) 206-6223

Well Location

Latitude: 30-23-30 Longitude: 89-16-20
 Method of Lat/Long (check one): Conventional Survey _____
 USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
1R 1/4 SW 1/4 Sec 35 T 70 R 13W
 Distance Direction Nearest Town
4 Miles North of Delisle

Pump Type
Circle one

Air Lift Jet Submersible
 Bucket Piston Turbine
 Centrifugal Rotary Flowing Well
 Other (specify): ~~1913~~
 Date Pump Installed: 11-9-13
 Rated Pump Capacity: 18 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
 Setting Depth: 500 feet
 Number of Stages: 8

Pump Test Data

Date Well Tested: 11-9-13
 Static Water Level (A): 80 Feet Below Land Surface
 Pumping Water Level (B): 120 Feet Below Land Surface
 Drawdown [(B) - (A)]: 20 Feet Below Land Surface
 Test Pumping Rate: 18 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: _____ feet
 Well yielded 18 GPM with a drawdown of
20 feet after 4 hours of pumping

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

Michael P. McGill 0239
 Print Name of Pump Installer and License No. (if applicable)

Michael McGill
 Signature of Pump Installer