State Well Report Part 1 Part 1 Part 1 Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 10631 Jackson, MS 39283-0631 (601)951-9638 (fax) (601)951-9638 (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 Owner Name On AUM A MCAP Mailing Address: AA Adv Fox Resources Post Christian MAP Conner Name On AUM A MCAP City  Telephone No. (AR) 152 - 14400  Well Data  Well Date well drilling started: 5-9-04  John Get above or below; Circle one) Industrial Public Supply Irrigation Fish Culture Other:  Date well drilling started: 5-9-04  Method of Measurement (circle one) steel tape electric tape  Well Data  Well Data  Well Data  Well depth: 1009 Well depth: 1009 Well depth: 1009 Well grouted to a depth of 10 feet  Type of grout (circle one): Cement Bentonite  Mix  Screen length: 5 feet Screen diameter: 1 inches Type of casing: DNC  Screen length: 5 feet Screen diameter: 1 inches Type of screen  Other (describe): 6-00  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction in casing: 6-10  Top of lap pipe or reduction	Harrison	State W	all Doport	
Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 10631 Jackson, MS 39289-0631 (601)354-0938 (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 Owner Information Owner Name Shawana Madres: Address: Addr				For Office Use Only:
Driller: CASE WAITER WELLS No. 100 Home industrial Public Supply Irrigation Fish Culture Other:  Date well drilling started:  Date well drilling completed:  Date well drilling started:  Date	County: TACKSOF	_		Aquifer: 405
Date drilling completed: 5—9—00  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.  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 Name Snawna McGree  Mailing Address 32430 Fox Run Dr.  Mailing Address 32430 Fox Run Dr.  Mailing Address 32430 Fox Run Dr.  Method of Lat/Long (circle one): Conventional Survey,  Well Data  Well drilling completed: 5—9—00  Date well drilling completed: 5—9—00  Static Water Level: 35—feet above or feelow (circle one) land surface  Method of Measurement (circle one) steel tape electric tape (air line) other:  Well grouted to a depth of 10 feet  Type of grout (circle one): Cemen Bentonite  Mix  Screen length: 594 feet  Screen flaght: 594 feet  Screen flaght: 594 feet  Casing diameter: 3 inches  Stering depth: From 594 feet to 009 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:	Permit #:	Office of Land a	and Water Resources	b xx
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 On AUNA McGel  Mailing Address A 4 Alo Fox Lun D  City State  Telephone No. (a) 452 - 4400  Well Data  Well Data  Well Data  Well Data  Well drilling started: 5-9-01  Date well drilling scompleted: 5-9-00  If flowing, method of flow regulation: Valve NIA  Other (describe)  Static Water Level: 35 feet above or factow (circle one) land surface Date measured: 5-9-00  Method of Measurement (circle one) steel tape electric tape air line other:  Type of grout (circle one): Cement Gentonite Mix  Casing length: 594 feet Casing diameter: a inches Type of casing: NC  Screen length: 6 feet Screen diameter: a inches Type of sesteed: 100 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 back of page  Logs run (circle all applicable) No log run Electric Garman Ray Density Sonic Neutron Other:  Name of organization running log(s): NIA  Teartify 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.				
Well Owner Name Snawna Mailing Address 22420 Fox Run Dr.  Well Owner Name Snawna Mailing Address 22420 Fox Run Dr.  Well Data  Well Of Lairbudge Green Circle one): Conventional Survey,  Well Data  Well Circle one Home Industrial Public Supply Irrigation Fish Culture Other:  Date well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well drilling started: 5-9-00 Date well drilling completed: 5-9-00  Well Data Well Data Well drilling started: 5-9-00  Well Data	Date drilling completed: 5-9-00			E-log #:
Owner Name Shauma McGele  Mailing Address: Address Add			driller in detail and filed w	ith the Department within
Owner Name Shawha McGee  Mailing Address: 32430 Fox Run Dr.  Method of Lat/Long (circle one): Conventional Survey,  Well Data  Purpose of Well (circle one): Money Shaws 12 Date  Well Data  Purpose of Well (circle one): Industrial Public Supply Irrigation Fish Culture Other:  Date well drilling started: 5-9-010  If flowing, method of flow regulation: Valve NIA Other (describe)  Static Water Level: 35 feet above or celow [circle one) land surface Date measured: 5-9-010  Method of Measurement (circle one) steel tape electric tape air line other:  Hole depth: 1001 Well depth: Well grouted to a depth of feet  Type of grout (circle one): Cement Bentonite Mix  Casing length: 594 feet Casing diameter: inches Type of screen: DNC  Screen length: Screen diameter: inches Type of screen: DNC  Screen slot size: 1008 inches Setting depth: From 594 feet to 1009 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 back of page  Latituda 25 1 Jay Long Land Long: Conventional Survey, Well Add Land Long (ircle one): Conventional Survey, Sang Land Land Land Land Land Land Land Land			30-21-07 Well	Location 89-13-11
USGS quad Hand-held GPS. Survey grade GPS    State   Zip Code   No.   No	Owner Name Shawna M	cGee		
Telephone No. (338) 452 - 44100  Well Data  Purpose of Well (circle one Home Industrial Public Supply Irrigation Fish Culture Other:  Date well drilling started: 5-9-010  If flowing, method of flow regulation: Valve Near the describe of the Method of Measurement (circle one) steel tape electric tape air line other:  Hole depth: 109 Well depth: 109 Well depth: Well grouted to a depth of feet  Type of grout (circle one): Cerment Bentonite Mix  Casing length: 594 feet Casing diameter: inches Type of screen: DNC  Screen length: 15 feet Screen diameter: inches Type of screen: DNC  Screen sol of size: 1008 inches Setting depth: From 594 feet to 1009 feet  Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development  Other (describe): 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): Name of organization r	Mailing Address: 22426 Fo	x Run Dr.	Method of Lat/Long (circle or	ne): Conventional Survey,
Telephone No. (AN) 452 - 44100			USGS quad Hand-held	GPS, Survey-grade GPS
Telephone No. (2007) 452 - 44400  Well Data  Well Data  Purpose of Well (circle one Home) Industrial Public Supply Irrigation Fish Culture Other:  Date well drilling started: 5-9-04 Date well drilling completed: 5-9-04  If flowing, method of flow regulation: Valve NIA Other (describe)  Static Water Level: 35 feet above or celow circle one) land surface Date measured: 5-9-04  Method of Measurement (circle one) steel tape electric tape air line other:  Type of grout (circle one): Cement Bentonite Mix  Casing length: 594 feet Casing diameter: inches Type of casing: NC  Screen length: 6 feet Screen diameter: inches Type of screen: OVC  Screen slot size: OV inches Setting depth: From 594 feet to 109 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 back of page  Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:  Name of organization running log(s): NIA  Levilfy 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.  TACL Ridgacia O 4772		ms 39571		Twn To S Rng RIZ W
Purpose of Well (circle one Home Industrial Public Supply Irrigation Fish Culture Other:  Date well drilling started: 5-9-00 Date well drilling completed: 5-9-00 If flowing, method of flow regulation: Valve NIA Other (describe)  Static Water Level: 35 feet above or feelow (circle one) land surface Date measured: 5-9-00 Method of Measurement (circle one) steel tape electric tape (air line) other:  Hole depth: 109 Well depth: Well grouted to a depth of feet  Type of grout (circle one): Cement Bentonite Mix  Casing length: 5914 feet Casing diameter: inches Type of casing: NC  Screen length: 5 feet Screen diameter: inches Type of screen: OVC  Screen slot size: ONE inches Setting depth: From 594 feet to 09 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 back of page  Logs run (circle all applicable) No log run Electric Gamma Ray Density Sonic Neutron Other:  Name of organization running log(s): NIA  I certify that the well was drilled, coastructed, 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.  TACK Ridgadell 0-473		•	Distance Direction	Nearest Town
Purpose of Well (circle one Home Industrial Public Supply Irrigation Fish Culture Other:  Date well drilling started: 5-9-06 Date well drilling completed: 5-9-06 If flowing, method of flow regulation: Valve NIA Other (describe)  Static Water Level: 35 feet above or feelow (circle one) land surface Date measured: 5-9-06 Method of Measurement (circle one) steel tape electric tape air line other:  Hole depth: 109 Well depth: Well grouted to a depth of 6 feet  Type of grout (circle one): Cernent Bentonite Mix  Casing length: 514 feet Casing diameter: inches Type of casing: NC Screen length: 6 feet Screen diameter: inches Type of screen: ON C  Screen slot size: 008 inches Setting depth: From 594 feet to 6 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 back of page  Logs run (circle all applicable) No log run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s): No log run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s): No log run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s): No log run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s): No log run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s): No log run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s): No log run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s): No log run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s): No log run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s): No log run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s): No log run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s):	Telephone No. (2) 452 - 44	<i>VO</i>	Miles	of PASS CHRISTIAN
Date well drilling started: 5-9-00 Date well drilling completed: 5-9-00 If flowing, method of flow regulation: Valve NIA Other (describe)  Static Water Level: 35 feet above or below (circle one) land surface Date measured: 5-9-00 Method of Measurement (circle one) steel tape electric tape air line other:  Hole depth: 109 Well depth: 109 Well grouted to a depth of feet  Type of grout (circle one): Cement Bentonite Mix  Casing length: 594 feet Casing diameter: inches Type of casing: NO  Screen length: 15 feet Screen diameter: inches Type of screen: DVC  Screen slot size: 008 inches Setting depth: From 594 feet to 099 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 back of page  Logs run (circle all applicable) No log run Electric Gamma Ray Density Sonic Neutron Other:  Name of organization running log(s): NA  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.  TACL Ridgall 0-473		Well I	Data	
If flowing, method of flow regulation: Valve NA Other (describe)  Static Water Level:	Purpose of Well (circle one Home Ind	ustrial Public Supply	Irrigation Fish Culture	Other:
Static Water Level:	Date well drilling started: 5-9-	OL Date w	vell drilling completed:5_	9-06
Method of Measurement (circle one) steel tape electric tape air line other:  Hole depth:	If flowing, method of flow regulation: Val	ve NA Other (d	escribe)	
Hole depth:	Static Water Level:35feet ab	ove or below (circle one) l	and surface Date measured:	5-9-00
Type of grout (circle one): Cement Bentonite Mix  Casing length: 574 feet Casing diameter:	Method of Measurement (circle one) st	eel tape electric tape	air line other:	
Casing length: 594 feet Casing diameter: inches Type of casing: NC	Hole depth: Well dep	th: <u> </u>	Well grouted to a depth of	feet
Screen length:	Type of grout (circle one): Cement	Bentonite Mix		
Screen slot size:	Casing length: 594 feet Casin	g diameter:	_inches Type of casing:	DVC
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 back of page  Logs run (circle all applicable) No log run Electric Gamma Ray Density Sonic Neutron Other:  Name of organization running log(s): NA  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.  TACK Ridgael 0-473	Screen length: 15 feet Scree	en diameter:	inches Type of screen:	OVC
Other (describe):  Top of lap pipe or reduction in casing:	Screen slot size: 1008 inches Setting depth: From 594 feet to 609 feet			
Top of lap pipe or reduction in casing: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):  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.  TACK RIAGAEL 0-473	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:  Name of organization running log(s):  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.  TACK RIAGACI 0-472	Other (describe):			
Name of organization running log(s):  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.  TACK RIAGAEL 0-472	Top of lap pipe or reduction in casing: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.  TACK RIAGAEL 0-472	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.  TACK RIAGAEL 0-472  June Riagael 10-472				
Jack Ridgdell 0-472 Suh Riffeller	1 · · · · · · · · · · · · · · · · · · ·			
Print Name of Water Well Contractor and License No.  Signature of Water Well Contractor PECFIVE	Tack poid adoll no	(12)		01 1.1.
Agnature of Water Well Contractor and License No.	Print Name of Water Wall Contractor of V	Y Id		pay due
	Trunchame of water wen Contractor and I	License INO.	Ignature of	water Well Contractor

JUN 07 2006

BY: OLWR

Ground Level				
•				

Description of Formations Encountered	From	To
TOO SOIL	0	
white coanesand	1	23
Gray Clay	13	XO
white coarse sand	80	120
Blue clay wistlears of sand	120	55
Carau coarse sand	551	609

If more than one screen, show location of each on sketch

Sketch the property layout and include the following: 1) the well location; 2) a aid in locating the well; 3) any roads, power lines, or other items 4) indicate direction.  **The content of the content	any permanent structures on the property that may that may aid in locating the property and the well;
Landowner Name: Shawna mcGree	1

Signature of Water Well Contractor

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BY: OLWR

Harason STATE V	VELL REPORT	
Permit #: Primp Install  Permit #: Office of La  Primer: Coast Water Wells IV.  Driller: Coast Water Wells IV.  Driller: 5-9-010	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 #: Elevation:	
This report should be prepared by the pump installer in coinstallation of pump.	letail and filed with the Department within 30 days of the	
Well Owner Information	Well Location	
Owner Name: Shawna McGce	Latitude 30° 21' Off' The Control of	
Mailing Address: 2242U FOX PUN Dr.	Method of Lat/Long (circle one): Conventional Survey,	
	USGS quad Hand-held GPS, Survey-grade GPS	
RassChristain Ms 39571 City State Zip Code	USGS quad Hand-held GPS, Survey-grade GPS  Sic 1/4 Sic 1/3 Twn T Sic 1/2 W  N W N N N N N N N N N N N N N N N N	
Telephone No. (28)452-44100	2 Miles N of Pass Chaisman	
Pump Type	Power Type	
Circle one	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:	
Date Pump Installed: 5-10-00	Setting Depth: 60FT. Drop Pipe feet	
Rated Pump Capacity:	Number of Stages:	
Pump Test Data	Method of Measuring Water Level Circle one	
Date Well Tested: _5-10-010		
Static Water Level (A):Feet Below Land Surface		
Pumping Water Level (B): NA Feet Below Land Surface	Other (specify):	
Drawdown [(B) – (A)]: NA Feet Below Land Surface	For flowing well, measured shut in head:feet	
Test Pumping Rate:	Well yielded GPM with a drawdown of	
Duration of Pump Test (minimum 4 hours):	NA feet afterNA hours of pumping	
I HEREBY CERTIFY that the above statements are true to the bes	st of my knowledge.	
Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer	

JUN 0 7 2006 **BY: OLW**R