

# 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)

For Office Use Only:

Aquifer: \_\_\_\_\_  
Well #: Q-14  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: Holmes  
Permit #: \_\_\_\_\_  
Driller: Ernest Cresswell  
Date drilling completed: 9-28-06

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	Well Location
Owner Name: <u>Bobby IRBY</u>	Latitude: <u>33° 03' 45"</u> Longitude: <u>90° 14' 00"</u>
Mailing Address: <u>P.O. Box 17207</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>
<u>D'IBERVILLE, MS. 39540</u>	USGS quad, Hand-held GPS, Survey-grade GPS <input checked="" type="checkbox"/>
City State Zip Code	<u>SW 1/4 NE 1/4 Sec 18 Twn 14 - Rng 1-E</u>
Telephone No. <u>(228) 861-7848</u>	Distance Direction Nearest Town
	<u>4 Miles East of Thornton</u>

**Well Data**

Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other: Camp

Date well drilling started: 9-25-06 Date well drilling completed: 9-28-06

If flowing, method of flow regulation: Valve  Other (describe)

Static Water Level: 57 feet above or below (circle one) land surface Date measured: 9-28-06

Method of Measurement (circle one) steel tape electric tape air line other: \_\_\_\_\_

Hole depth: 360 Well depth: 340 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 720 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 20 feet Screen diameter: 4 inches Type of screen: PVC

Screen slot size: 010 inches Setting depth: From 320 feet to 340 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

Log 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.

ERNEST M. CRESSWELL 0-150 Ernest M. Cresswell  
Print Name of Water Well Contractor and License No. Signature of Water Well Contractor

RECEIVED

09/12/2006  
BY: OLWF



