

**State Well Report
Part 1 – Driller's Log**

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225
(601)961- 5210
(601)961- 5228 (fax)

County: Issaquena
 Permit #: NA
 Driller: UNR-7226
 Date drilling completed: 12/20/15

For Office Use Only:

Aquifer: _____
 Well #: C89
 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 align="center">Information on Well Owner (Landowner if borehole is not for a water well)</p> <p>Owner Name <u>USACE Vicksburg District</u> Mailing Address: <u>4155 Clay Street</u> <u>Vicksburg MS 39180</u> City State Zip Code Telephone No. <u>(601) 631-5000</u></p>	<p align="center">Well or Borehole Location</p> <p>Latitude: <u>32.48.02</u> Longitude: <u>91.07.18</u> Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS <u>gW</u> <u>SW</u> ¼ <u>NE</u> ¼ Sec <u>5</u> Twn <u>11N</u> Rng <u>13E</u> Distance Direction Nearest Town <u>14</u> Miles <u>WEST</u> of <u>Rolling</u></p>
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Well / Borehole Data

Date drilling started: 11/20/15 Date drilling completed: 12/20/15 Hole depth: 90' Hole diameter: 20"
 Location of the source of any surface water used for drilling: NONE
 Method of dosing and volume of Chlorine used in drilling and development: 10 GALLONS OF BLEACH POURED INTO H2O HOLDING CONTAINER
 Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: NONE
 Name of organization running log(s): _____
 Purpose of borehole (check one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump
 Seismic Survey Other (describe) RELIEF WELL
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: RELIEF WELL
 If a flowing well, method of flow regulation: Valve NONE Other (describe) _____
 Static Water Level: 11' BELOW feet above or below (circle one) land surface Date measured: _____
 Method of Measurement (circle one) steel tape electric tape air line other: _____
 Well depth: 85' Well grouted to a depth of 10' feet Type of grout (circle one): Neat Cement bentonite Mix
 Casing length: 25' feet Casing diameter: 8" inches Type of casing: SS
 Screen length: 60' feet Screen diameter: 8" inches Type of screen: SS
 Screen slot size: .020 inches Setting depth: From 85' feet to 25' 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: NONE feet. *If telescoped or more than one screen, describe on next page*

