## STATE WELL REPORT

## County: Jackson Permit #: Driller: Michael Fryfogle Date drilling completed: 10/25/2021

Owner Name: David Copley

**Well Owner Information** 

(Landowner if borehole is not for a water well)

## Part 1 Driller's Log

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225-2309
(601)961-5555

(601)961-5228 (fax)

For Office Use Only:

Well #: K819

Aquifer: \_\_\_\_\_

elev 78

E-Log #:

Well or Borehole Location

Latitude: 30.5315400 Longitude: -88.6467130

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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.

Mailing Address: 40 Hatten Cemetery Rd Me	thod of Lat/Long (check one): Conventional Survey,			
USo	GS quad, Hand-held GPS, Survey-grade GPS			
Lucedale Ms 39452	SW <sub>1/4</sub> SW <sub>1/4</sub> , Sec 12 <sub>T</sub> 6S <sub>R</sub> 7W			
City State Zip Code 2	.46 <sub>Miles</sub> E <sub>of</sub> Lucedale			
	istance) (Direction) (Nearest Town)			
Well / Borehole Data  Date drilling started: 10/25/2021 Date drilling completed: 10/25/2021 Hole depth: 130 Hole diameter: 4 1/2				
Location of the source of any surface water used for drilling:				
Method of dosing and volume of Chlorine used in drilling and d				
Logs run (check <i>all applicable</i> ): No log run <b>모</b> Electric Gamma R	ay 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 ( <i>desc</i>	cribe)			
If drilling is not related to water well construction, skip the remainder of this block				
Purpose of Well (check all applicable): Home Industrial	Public Supply Irrigation Fish Culture			
Other (describe):				
If a flowing well, method of flow regulation: Valve Other (describe)				
Static Water Level: 35feet [ above or [ below] land surface Date measured: 10/25/2021 (check one)				
Method of measurement (check one): Steel tape Electric tape Air line Other (describe):				
Well depth: <u>130</u> Well grouted to a depth of: <u>_10</u> feet Type of grout (check <i>one</i> ): Neat Cement Bentonite⊡Mix				
Casing length: 105 feet Casing diameter: 2 inches Type of casing: Sch40				
Screen length: 25feet Screen diameter: 2inches Type of screen: Wrap				
Screen slot size: <u>.06</u> inches Setting depth: From <u>105</u> feet to <u>130</u> feet				
Type of completion (check all applicable): Gravel packed Underreamed 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

Form: OLWR-SWR-1A (4/13)

<sub>County:</sub> <u>Jackson</u>	_ 02-01-
Permit #:	
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02-01-2022
By OLWR

For Office Use Only:			
Well #:	K819		
_			

The sketch below only required for water wells

Ground Level _	<b>_</b>	
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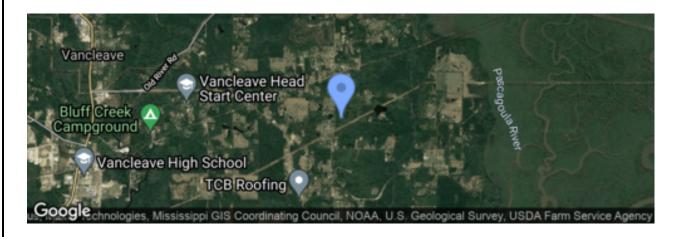
<u>Description of formations encountered must be provided for all wells</u> <u>and boreholes, unless specifically exempted by regulations</u>

Description of Formations Encountered	From ( <i>depth</i> )	To (depth)
Mix	From ( <i>depth</i> ) Ground level	18
Clay Sand	18	80
Sand	80	130
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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) north arrow



Landowner Name: David Copley

I HEREBY 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 Fryfogle 0408

01/28/2022

Print Name of Responsible Licensee and License No.

Date

Michael Fryfogle Signature of Licensee

Form: OLWR-SWR-1B (4/13)