

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 #: M-423
L. S. Elevation: _____
E-log #: _____

County: JACKSON
Permit #: _____
Driller: COAST WATER Well
Date drilling completed: 8-6-04

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>CHRIS YAUCH</u>	Latitude: <u>30.72.642</u> Longitude: <u>088.27.241</u> <small>38 14</small>
Mailing Address: <u>DUNN ESTATES RD.</u>	Method of Lat/Long (circle one): Conventional Survey.
<u>MOSS POINT, MS. 39562</u>	USGS quad, <u>(Hand-held GPS)</u> Survey-grade GPS
City State Zip Code: _____	<u>SW 1/4 NE 1/4</u> Sec. <u>211</u> Twn <u>T65</u> Rng <u>R5W</u>
Telephone No. <u>(228) 696-9235</u>	NW Distance Direction Nearest Town <u>4 1/2</u> Miles <u>NE</u> of <u>Helena</u>

Well Data

Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other: _____
Date well drilling started: 8-6-04 Date well drilling completed: 8-6-04
If flowing, method of flow regulation: Valve N/A Other (describe) _____
Static Water Level: 10' feet above or below (circle one) land surface Date measured: _____
Method of Measurement (circle one) steel tape electric tape air line other: _____
Hole depth: 75 Well depth: 75 Well grouted to a depth of 10 feet
Type of grout (circle one): Cement Bentonite Mix
Casing length: 65 feet Casing diameter: 2 inches Type of casing: 2" P480 PVC
Screen length: 10 feet Screen diameter: 2 inches Type of screen: PVC SLT 80 SWS
Screen slot size: .008 inches Setting depth: From 65 feet to 75 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: N/A 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): N/A

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.

JACK RIDGDELL 0-472
Print Name of Water Well Contractor and License No.

Jack Ridgell
Signature of Water Well Contractor

RECEIVED

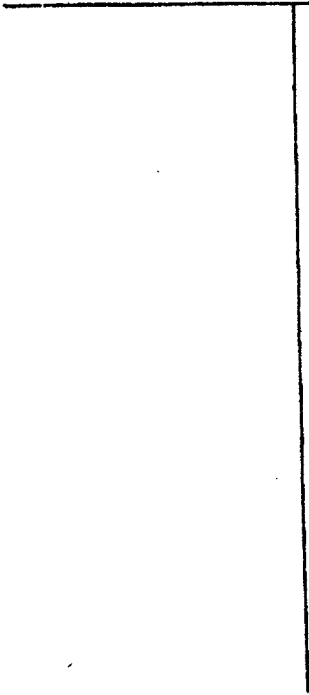
AUG 19 2004

BY: OLWR

If well telescopes please sketch below and show depths.

Ground Level

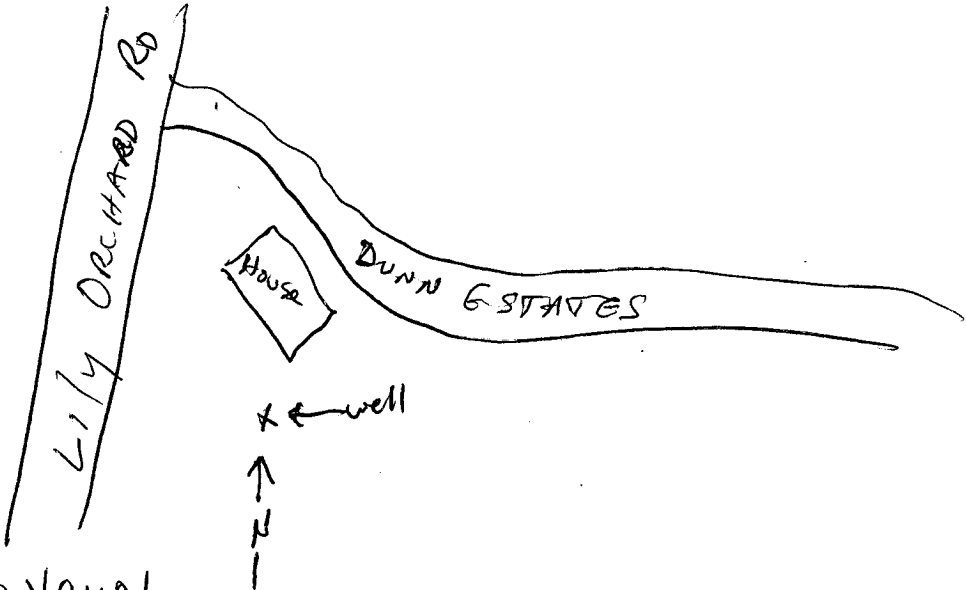
M-413



Description of Formations Encountered	From	To
Top Soil	0	2
White Coarse Sand	2	30
Blue Clay	30	50
White Coarse Sand	50	75

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) indicate direction.



Landowner Name: Chris Yauch

John Kilgus
 Signature of Water Well Contractor

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