

# 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 #: N-1028  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: Jackson  
Permit #: \_\_\_\_\_  
Driller: Coast Water Wells, Inc.  
Date drilling completed: 1-22-08

**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>Robert Martino</u>              | Latitude: <u>30° 25' 708"</u> Longitude: <u>88° 52' 678"</u>                       |
| Mailing Address: <u>5928 St. Martin Rd.</u>    | Method of Lat/Long (circle one): <u>42</u> Conventional Survey, <u>41</u>          |
| <u>Biloxi, Ms 39532</u><br>City State Zip Code | USGS quad, <u>(Hand-held GPS)</u> Survey-grade GPS                                 |
| Telephone No. <u>(228) 297-4354</u>            | <u>N 1/4 NW 1/4 Sec 22 Twn T 75 Rng R 9 W</u>                                      |
|  | Distance <u>1/2</u> Miles Direction <u>EAST</u> of Nearest Town <u>D'Iberville</u> |

**Well Data**

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

Date well drilling started: 1-22-08 Date well drilling completed: 1-22-08

If flowing, method of flow regulation: Valve N/A Other (describe) \_\_\_\_\_

Static Water Level: 25 feet above or (below) (circle one) land surface Date measured: 1-22-08

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

Hole depth: 257 FT Well depth: 257 FT Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 247 feet Casing diameter: 2 inches Type of casing: PVC

Screen length: 10 feet Screen diameter: 2 inches Type of screen: PVC

Screen slot size: .004 inches Setting depth: From 247 feet to 257 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 Ridgell 0-472  
Print Name of Water Well Contractor and License No.

Jack Ridgell  
Signature of Water Well Contractor

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BY: OLWR



# STATE WELL REPORT

## 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 #: N-1028

Elevation: \_\_\_\_\_

County: Jackson

Permit #: \_\_\_\_\_

Driller: Coast Water Wells SRV

Date completed: 1-22-08

**This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump.**

| Well Owner Information                        | Well Location  |
|---|--|
| Owner Name: <u>Robert Martino</u>             | Latitude: <u>30° 25' 708"</u> Longitude: <u>088° 52' 478"</u>      |
| Mailing Address: <u>5928 ST. Martin Rd.</u>   | Method of Lat/Long (circle one): Conventional Survey, <u>42</u>    |
| <u>Biloxi MS 39532</u><br>City State Zip Code | USGS quad, <u>Hand-held GPS</u> Survey-grade GPS                   |
| Telephone No. <u>228-297-4354</u>             | <u>N</u> ¼ <u>NW</u> ¼ Sec <u>22</u> Twn <u>T75</u> Rng <u>R9W</u> |
|   | Distance Direction Nearest Town                                    |
|   | <u>1/2</u> Miles <u>EAST</u> of <u>D'Iberville</u>                 |

| Pump Type<br>Circle one   | Power Type<br>Circle one   |
|---|--|
| Air Lift <input type="radio"/> Jet <input checked="" type="radio"/> Submersible | Diesel Engine Gasoline Engine Natural Gas  |
| Bucket <input type="radio"/> Piston <input type="radio"/> Turbine               | <input checked="" type="radio"/> Electric Motor <input type="radio"/> Hand <input type="radio"/> Tractor PTO |
| Centrifugal <input type="radio"/> Rotary <input type="radio"/> Flowing Well     | Windmill Other (specify): _____  |
| Other (specify): _____  | Horse Power Rating of Motor: <u>1 HP</u>   |
| Date Pump Installed: <u>4-25-08</u>   | Setting Depth: <u>60 FT. Drop pipe</u> feet  |
| Rated Pump Capacity: <u>8</u> Gallons Per Minute                                | Number of Stages: <u>2</u>   |

| Pump Test Data  | Method of Measuring Water Level<br>Circle one  |
|---|--|
| Date Well Tested: <u>4-25-08</u>                            | <input checked="" type="radio"/> Air Line <input type="radio"/> Electric Measuring Line <input type="radio"/> Steel Tape |
| Static Water Level (A): <u>35</u> Feet Below Land Surface   | Other (specify): _____   |
| Pumping Water Level (B): <u>N/A</u> Feet Below Land Surface | For flowing well, measured shut in head: <u>N/A</u> feet   |
| Drawdown [(B) - (A)]: <u>N/A</u> Feet Below Land Surface    | Well yielded <u>25</u> GPM with a drawdown of  |
| Test Pumping Rate: <u>8</u> Gallons Per Minute              | <u>N/A</u> feet after <u>N/A</u> hours of pumping  |
| Duration of Pump Test (minimum 4 hours): <u>4</u> hours     |  |

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

John Elkins 0-716P  
 Print Name of Pump Installer and License No. (if applicable)

[Signature]  
 Signature of Pump Installer

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MAY 14 2008  
 BY: OLWR