State W	ell Report						
County: JACKSON P.	For Office Use Only:						
Mississippi Department	t of Environmental Quality Aquifer:						
Permit #: Office of Land a	nd Water Resources Well #: S (604						
1 5 11 1 4 Active 14 1907 00 14011 104 1 L A	Sox 10631 L. S. Elevation:						
	961-5210						
(601) 35	4-6938 (fax) E-log #:						
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 City of Moss Point Mailing Address: Hubert Street	Latitude: 38 · 23 · 47 " Longitude: 88 · 31 · 48 "						
Mailing Address: Hubert Street	Method of Lat/Long (circle one): Conventional Survey,						
	USGS quad, Hand-held GPS, Survey-grade GPS						
Moss Point Ms. 39543 City State Zip Code	NN 1/2 NN 1/2 Sec 31 / Twn 7 25 Rng R5W						
Telephone No. (601) 613-3644	Distance Direction Nearest Town Miles of Moss Point						
Bill CAKLEY Well I	Data						
Purpose of Well (circle one) Home Industrial Public Supply	Irrigation Fish Culture Other: 1837 7 MCSN750 West						
	Irrigation Fish Culture Other: Test & Monron-Well vell drilling completed: 7/29/09						
If flowing, method of flow regulation: Valve W/A Other (de							
Static Water Level:fee above or below (circle one) la	and surface Date measured: 7/29/09						
Method of Measurement (circle one) steel tape electric tape at line other:							
Hole depth: 297FT, Well depth: 297 Well grouted to a depth of 10 feet							
Type of grout (circle one): Cement Bentonite Mix							
Casing length: 297 feet Casing diameter: 2							
•	inches Type of screen: PVC SAWED						
Screen slot size: 1010 inches Setting depth: From	230 feet to 270 feet						
Type of completion (circle all applicable): Gravel packed Underr							
Other (describe): GRAVEL PACK 225-297							
Top of lap pipe or reduction in casing: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 $log(s)$: $\mathcal{M} \mathcal{D} \in \mathcal{Q}$							
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.							
JAIK RIDGOELL 0-472	Just Beflere						
Print Name of Water Well Contractor and License No.	Signature of Water Well Contractor FCFIVFF						

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If well telescopes please sketch below and show depths.

Ground Level	

Description of Formations Encountered	From	То
	0	2
BROWN SAND	2	10
Blue CAM STREAKS OF SAND	10	52
Blue Clay STREAKS OF SAND BROWN COAKSE SAND & PRA GRAVES	52	94
Blue clay of STREAKI OF SAND	94	102
Blue clay uf STREAK OF SAND GRAY MEDIUM TO COARSE SAND BLE CLAY GRAY MEDIUM TO COARSE SAND	102	210
BISE CLAY	ZIO	225
GRAY MEDIUM TO COASE SAND	225	245
Blue clay	295	297
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If more than one screen, show location of each on sketch

Sketch the property layout and include aid in locating the well;. 4) indicate direction.	the following: 1) the well loc 3) any roads, power lines, or c	ation; 2) any perm ther items that ma	nanent structures by aid in locating	s on the property a	ty that may nd the well;
	(}	15/	
		72 8		ofrleri	Hobert St
		PHINES		Map	(Xwell
	Merioim ST				
		(
Landowner Name: City O	Thoss Poin				

Signature of Water Well Contractor

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