

# 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)

County Jackson  
Permit #:  
Driller Coast Water Well Serv.  
Date drilling completed 3-24-10

For Office Use Only:  
Aquifer: Q 608  
Well #:  
L. S. Elevation:  
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 <u>Michael Noonan</u>	Latitude: <u>30° 23' 58" N</u>	Longitude: <u>88° 26' 04" W</u>	
Mailing Address: <u>3844 Grand Bature Rd.</u>	Method of Lat/Long (circle one): Conventional Survey, <input checked="" type="checkbox"/> Hand-held GPS, <input checked="" type="checkbox"/> Survey-grade GPS		
<u>Miss Point, Ms 39562</u>	USGS quad, <u>NW 1/4 NW 1/4 Sec 36 T7S R5W</u>		
City State Zip Code	Distance <u>7</u> Miles <u>ENE</u> Direction of <u>Pascagoula</u> Nearest Town		
Telephone No. <u>228 475-4752</u>			

**Well Data**  
Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other: we went deeper with this one  
Date well drilling started: 3-24-10 Date well drilling completed: 3-24-10  
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: 3-24-10  
Method of Measurement (circle one) steel tape electric tape air line other: \_\_\_\_\_  
Hole depth: 266 FT. Well depth: 266 FT. Well grouted to a depth of 10 feet  
Type of grout (circle one): Cement Bentonite Mix  
Casing length: 256 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 256 feet to 266 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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Q 608

If well telescopes please sketch below and show depths.

Ground Level

Description of Formations Encountered	From	To
Top Soil	0	2
Orange Clay	2	10
White Coarse Sand	10	37
Blue Clay	37	50
White Coarse Sand w/ Strks of clay	50	155
Blue Clay	155	200
Gray Coarse Sand	200	216
Blue Clay	216	230
Gray medium to coarse sand	230	266

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.

Orange Grove Rd

GRAND BATTURE ROAD

SAN RD

House

x well

↑ N

Landowner Name: Mike Noonan

Jack Reddick  
Signature of Water Well Contractor

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# 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: Q 608  
 Well #: \_\_\_\_\_  
 Elevation: \_\_\_\_\_

County: Jackson  
 Permit #: \_\_\_\_\_  
 Driller: Coast Water Wells SRV.  
 Date completed: 3-24-10

**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>Michael Noonan</u>	Latitude: <u>30°23'838"</u> Longitude: <u>088°26'646"</u>
Mailing Address: <u>3844 Grand Bature Rd.</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS
<u>Miss Point, MS 39562</u>	<u>NW</u> ¼ <u>NW</u> ¼ Sec. <u>36</u> Twn <u>T7S</u> Rng <u>R5W</u>
City State Zip Code	Distance Direction Nearest Town
Telephone No. <u>228) 475-4752</u>	<u>1</u> Miles <u>ENE</u> of <u>Pascagoula</u>

Pump Type Circle one	Power Type 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	<u>Electric Motor</u> Hand 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>3/26/10</u>	Setting Depth: <u>40 FT. Droppipe</u> feet
Rated Pump Capacity: <u>9</u> Gallons Per Minute	Number of Stages: <u>2</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>3/26/10</u>	<u>Air Line</u> Electric Measuring Line Steel Tape
Static Water Level (A): <u>25</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>9</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 1/2</u> hours	

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

Jack Ridgell 0-472  
 Print Name of Pump Installer and License No. (if applicable)

Jack Ridgell  
 Signature of Pump Installer

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APR 06 2010

BY: OLWR