

# 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 #: G-116  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: Stone  
Permit #: \_\_\_\_\_  
Driller: \_\_\_\_\_  
Date drilling completed: 2/23/07

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>Don O'Neal</u>	Latitude: _____ Longitude: _____
Mailing Address: _____ <u>P.O. Box 2</u> <u>Perkingston, MS 39573</u> City State Zip Code	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS _____ 1/4 _____ 1/4 Sec <u>70</u> Twn <u>3S</u> Rng <u>11W</u>
Telephone No. (____) _____	Distance _____ Miles Direction _____ Nearest Town _____ <u>at</u> <u>Perkingston</u> <u>Red Creek Bridge 49</u>

Well Data

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

Date well drilling started: 2/22/07 Date well drilling completed: 2/23/07

If flowing, method of flow regulation: Valve \_\_\_\_\_ Other (describe) open flow

Static Water Level: flowing feet above or below (circle one) land surface Date measured: 2/23/07

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

Hole depth: 192' Well depth: 192' Well grouted to a depth of 10 feet

Type of grout (circle one) Cement Bentonite Mix

Casing length: 182 feet Casing diameter: 2 inches Type of casing: PVC SCH 40

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

Screen slot size: 108 inches Setting depth: From 182 feet to 192 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: \_\_\_\_\_ 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: Self-run

Name of organization running log(s): Moore's Water Well

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BY: OLWE

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.

Arnold Ray Moore 0533 Arnold Ray Moore  
Print Name of Water Well Contractor and License No. Signature of Water Well Contractor

