

STATE WELL REPORT

Part 1

Driller's Log

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225-2309
(601)961-5210
(601)360-0535 (fax)

For Office Use Only:

Well #: M92
Aquifer: _____
E-Log #: _____

County: Stone
Permit #: _____
Driller: Coast Water Wells, Inc
Date drilling completed: 9-28-13

State Law requires that this report be prepared by the license holder responsible for the work and filed with the Department at the above address within 30 days of completion of drilling of the well or borehole.

Well Owner Information (Landowner if borehole is not for a water well)	Well or Borehole Location
Owner Name: <u>Nathan Birdwell</u>	Latitude: <u>30°42'24.42" N</u> Longitude: <u>088°59'45.48" W</u>
Mailing Address: <u>East McHenry Road</u>	Method of Lat/Long (check one): Conventional Survey _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
<u>Perkinston, MS 39574</u>	USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
City State Zip Code	<u>NW 1/4 SE 1/4</u> , Sec <u>7</u> T <u>9</u> R <u>45</u> <u>W</u>
Telephone No. <u>228-224-6047</u>	<u>2</u> Miles <u>East</u> of <u>McHenry</u>
	(Distance) (Direction) (Nearest Town)

Well / Borehole Data	
Date drilling started: <u>9-26-13</u>	Date drilling completed: <u>9-28-13</u> Hole depth: <u>227</u> FT Hole diameter: <u>4</u> "
Location of the source of any surface water used for drilling: <u>N/A</u>	
Method of dosing and volume of Chlorine used in drilling and development: <u>1 gal. per 1000 drilling - 2 gals. in well</u>	
Logs run (circle all applicable): <input checked="" type="checkbox"/> No log run <input type="checkbox"/> Electric <input type="checkbox"/> Gamma Ray <input type="checkbox"/> Density <input type="checkbox"/> Sonic <input type="checkbox"/> Neutron Other: _____	
Name of organization running log(s): _____	
Purpose of borehole (circle one) <input checked="" type="checkbox"/> Water Well <input type="checkbox"/> Geotechnical/Geological Investigation <input type="checkbox"/> Ground Source Heat Pump	
Seismic Survey Other (describe) _____	

If drilling is not related to water well construction, skip the remainder of this block

Purpose of Well (circle all applicable): Home Industrial Public Supply Irrigation Fish Culture	
Other (describe): <u>Hunting Camp</u>	
If a flowing well, method of flow regulation: Valve _____ Other (describe) _____	
Static Water Level: <u>95</u> feet (above or <input checked="" type="checkbox"/> below) land surface Date measured: <u>9-28-13</u>	
Method of measurement (circle one): Steel tape Electric tape <input checked="" type="checkbox"/> Air line Other (describe): _____	
Well depth: <u>227'</u> Well grouted to a depth of: <u>10</u> feet Type of grout (circle one): Neat Cement <input checked="" type="checkbox"/> Bentonite Mix	
Casing length: <u>217</u> feet Casing diameter: <u>4</u> inches Type of casing: <u>PVC</u>	
Screen length: <u>10</u> feet Screen diameter: <u>4</u> inches Type of screen: <u>PVC</u>	
Screen slot size: <u>.006</u> inches Setting depth: From <u>217</u> feet to <u>227</u> feet	
Type of completion (circle all applicable): Gravel packed Underreamed Open hole <input checked="" type="checkbox"/> Natural Development	
Other (describe): _____	
Top of lap pipe or reduction in casing: <u>N/A</u> feet	

If telescoped or more than one screen, describe on next page

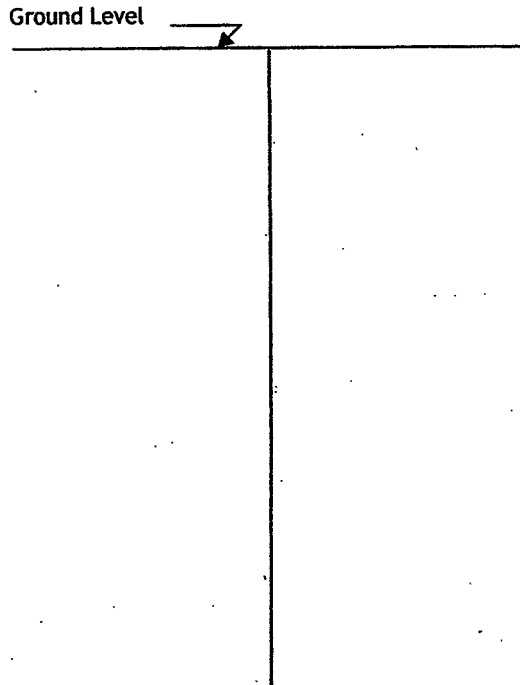
RECEIVED
OCT 04 2013
BY: OLWR

County: Stone
 Permit #: _____

For Office Use Only:
 Well #: M92

The sketch below only required for water wells

If well telescopes, show depths on sketch.



Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth)	To (depth)
Top Soil	Ground level	2
Orange Clay	2	25
Blue Clay	25	186
Gray Medium to coarse Sand	186	227

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) north arrow



RECEIVED
 OCT 04 2013
 BY: OLWR

Landowner Name: Nathan Birdwell

I HEREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state laws.

Jack Ridgell 0-473 10-1-13 Jack Ridgell
 Print Name of Responsible Licensee and License No. Date Signature of Licensee