



ENVIRONMENTAL COMPLAINTS AND LOCAL SERVICES DIVISION

**REPORT FOR ON-SITE SEWAGE TREATMENT
SOIL PERCOLATION OR SOIL PROFILE TEST
(PLEASE PRINT or TYPE)**

Work Order No.
System No.
Date Rec'd

GENERAL INFORMATION:

Name and Mailing Address of Property Owner: **Housing Authority Cherokee Nation P.O. Box 1007 Tahlequah 74485**

Owner Phone Number: _____ Owner's E-Mail Address (Optional): _____

Property Address: **111918 S. 4780 Road Roland 74954 Sequoyah Oklahoma**

Local Description: **A tract of land in the SE4 SE4 SE4, Section 26., T11N, R26E Lot Size in _____ ft' or _____ acres**

Tracing Location: **Property is located on the NW Corner of the intersection of S. 4779 Rd & S. 4780 Rd**

Water Supply: Individual Private Well or Public Water Supply Name: **Mayes Co. RWD #2**

GPS Coordinates: **Lat. 35°23'31" Long -94°30'49"**

WATERBODY PROTECTION AREA:

Dispersal field located in Water Body Protection Area (check one): Zone 1 Zone 2 None

Flow Certification: 27A O.S. 2001, Section 2-6-403 states: "It shall be the duty of the person contracting with an installer who is modifying or installing an on-site sewage treatment system for a residence or business to certify the number of bedrooms in the residence or the water usage of the business that will be served by the sewage treatment system so that the system can be properly sized."

This individual sewage treatment system will serve an individual residence or duplex with the following # of bedrooms **3**

The estimated flow or actual flow for the small public sewage system is _____ gal/day and is a _____

Sherry _____ Address _____ *Sherry Andrew* _____ **04/17/2026**

SOIL TEST RESULTS:

Depth of Test Hole	Soil Profile Description						Soil Percolation Test Description		
	HOLE #1		HOLE #2		HOLE #3		Shallowest Groundwater Depth	Overall Percolation Rate	
	Group	Depth* to Limiting Layer	Group	Depth* to Limiting Layer	Group	Depth* to Limiting Layer	inches	minutes inches	
0-6"								Person completing pres soak: Brian Miggetto	
6-12"								*For this pres soak was conducted in accordance with OAC 252-6-11	
12-18"								Percolation Rates	
18-24"							Test Hole #	Test Hole Depth	Test Hole Percolation Rate
24-30"							#1	inches	min in
30-36"							#2	inches	min in
36-42"							#3	inches	min in
42-48"							#4	inches	min in
48-54"							#5	inches	min in
							#6	inches	min in

*Depth in inches in 1' Limiting Layer: GW = Ground Water RX = Redox (must be 2 consecutive intervals) RC = Rock GS = Group 3 Soil

CERTIFIED SOIL TESTER USE ONLY:

I certify that I conducted the above-described soil profile description or percolation test in compliance with OAC 252-6-11 on **04/17/2026**

Email: **okbigmig@yahoo.com**

Signature **Brian Miggetto** **SP037 ES #1250**

P.O. Box 2038 **Tahlequah OK 74485 918-822-7988 04/17/2026**

This individual's test Certification Number provided by DEQ or your Registration Number associated with your RPS, RPES, PE, LS, or SS

DEQ USE ONLY:

Soil Test Performed by DEQ on (date): _____ DEQ Reviewed and Accepted

DEQ Soil Profile Test Joint Soil Profile DEQ Reviewed and Rejected

Environmental Specialist's Signature: _____ Employee ID: _____ Date Signed: _____

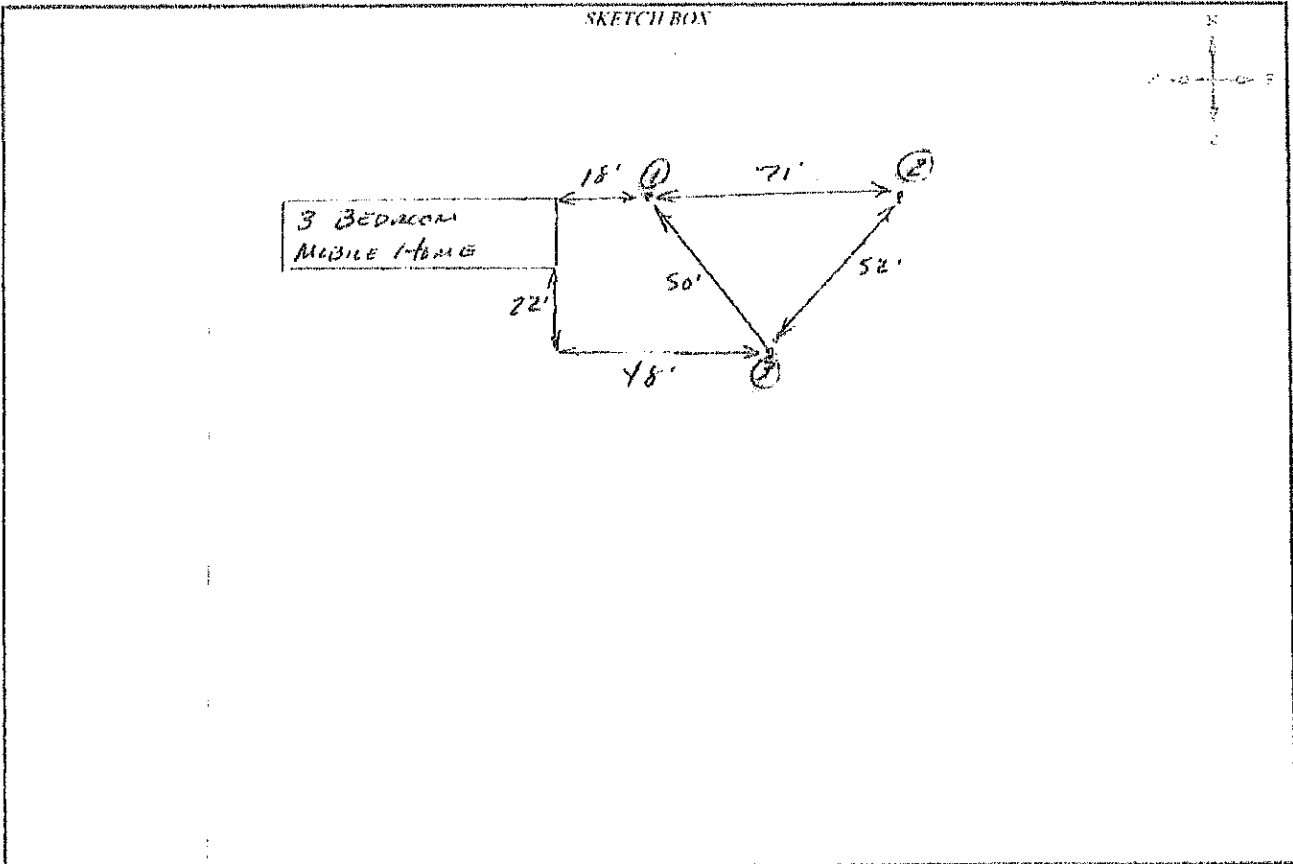
Work Order No. _____
 System No. _____
 Owner's Last Name _____

SYSTEM DESIGN: Check all that apply.

TREATMENT:
 Septic Tank with 1,000 gal. liquid capacity Aerobic Treatment Aerobic Treatment with Nitrogen Reduction

DISPERSAL:
 CSA: soil group 4 or percolation rate of _____ (min/inch) with 880 feet of perforated pipe with storage media or 660 feet of manufactured media systems. The trench bottom shall be no deeper than _____ inches.
 SE: soil group _____ with _____ feet of subsurface absorption trenches. The trench bottom shall be no deeper than _____ inches.
 EPA: soil group _____ with _____ feet of evapotranspiration trenches. The trench bottom shall be no deeper than _____ inches.
 L: with bottom dimensions of _____ feet by _____ feet or a diameter of _____ feet.
 DI: soil group _____ with a _____ -gallon capacity pump tanks and _____ feet of drip line no deeper than _____ inches.
 SI: soil group 3 with a 700 -gallon capacity pump tank and 4,039 square feet of surface application area.
 An Alternative system as described on the attached DEQ Form 641-581 Sup. "Supplemental Application for an Alternative System".

LOCATION OF TEST HOLES: Show the location of all test holes in relation to two fixed reference points in the sketch box below.



REMARKS: