County: Amite
Permit #:
Driller: GRENN WATER WELL & SUPPLY, INC. Date drilling completed:
SUPPLY, INC. 1/2/2
Date drilling completed:

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 #:	F- 608	
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.

30 days of completion of drilling of the well.				
Well Owner Information	Well Location			
Owner Name Frank Whittington	Latitude: 31° 4'124" Longitude: 90° 52'791"			
Mailing Address: 1409 East Howard St	Method of Lat/Long (circle one): Conventional Survey,			
	USGS quad, Hand-held GPS, Survey-grade GPS			
Centreville MS 39631 City State Zip Code	5 W/4 NW/4 Sec 20 Twn 1N Rng 3E			
Telephone No. (60/) 645-63/0.	Distance Direction Nearest Town 7 Miles SW of Liberty			
Well I)ata			
	1			
Purpose of Well (circle one) Home Industrial Public Supply	, ,			
Date well drilling started: ///2/05 Date	well drilling completed:			
If flowing, method of flow regulation: Valve Other (d				
Static Water Level:feet above of below circle one) !	land surface Date measured: ///2/05			
Method of Measurement (circle one) steel tape electric tape	air line other:			
Hole depth: Well depth:	Well grouted to a depth offeet			
Type of grout (circle one): Cement Bentonite Mix				
Casing length:				
Screen length:	inches Type of screen:			
Screen slot size: <u>•C/C</u> inches Setting depth: From				
Type of completion (circle all applicable): Gravel packed Under	rreamed 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:			
Name of organization running log(s):	Jane with all anniles ble months monte of the Milederical			
I certify that the well was drilled, constructed, and completed in				
Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.				
GRENN WATER WELL & SUPPLY, INC. Brian McClendon, lic. no. 0-664	Brian MEMINDIN			
Print Name of Water Well Contractor and License No.	Signature of Water Well Contractor			

DEC 0 5 2005 BY: OLWR

Ground	Level
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Description of Formations Encountered	Prom	To
red clar	0	15
	13	100
Sendt gravel white clay	100	120
white car	120	125
•		

If more than one screen, show location of each on sketch

Sketch the p	roperty 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.
	drive kouse
	Frank 1 1/2 in the state of the

Brian McClendon, lic. no. 0-664 GRENN WATER WELL & SUPPLY, INC.

STATE WELL REPORT Part 2

County: An. te

Permit #: ______ Miss

Driller: GRENN WATER WELL &
SUPPLY (, INC.

Date completed:

Pump Installer's Completion Report
Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 10631

P.O. Box 10631 Jackson, MS 39289-0631 (601)961-5210 (601)354-6938 (fax)

For Office Use Only:			
Aquifer:			
Well #:	R- 68		
Elevation	ı:		

This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump.

installation of pump.		
Well Owner Information	Well Location	
Owner Name: Frank Whittington	Latitude: 3164124" Longitude: 9052791"	
Mailing Address: 1409 East Howard St	Method of Lat/Long (circle one): Conventional Survey,	
	USGS quad, Aland-held GPS, Survey-grade GPS	
Centreville MS 39631 City State Zip Code	5W 14 NW 14 Sec 20 Twn 11 Rng 3E	
Suite Enp code	Distance Direction Nearest Town	
Telephone No. (661) 645-6316	7 Miles Sw of Liberty	

Pump Type Circle one		Power Type Circle one			
Air Lift	Jet	Submersible	Diesel Engine	Gasoline Engine	Natural Gas
Bucket	Piston	Turbine	Electric Motor	Hand	Tractor PTO
Centrifugal	Rotary	Flowing Well	Windmill	Other (specify):	
Other (specify): Horse Power Rating of Motor:					
Date Pump Installed	1: 11/2/05		Setting Depth:	90	feet
Rated Pump Capaci	ty:10	Gallons Per Minute	Number of Stages:	9	

Pump Test Data	Method of Measuring Water Level Circle one	
Date Well Tested:	Air Line Electric Measuring Line Steel Tape Other (specify):	
Drawdown [(B) – (A)]:Feet Below Land Surface Test Pumping Rate: Gallons Per Minute	For flowing well, measured shut in head:feet Well yielded	
Duration of Pump Test (minimum 4 hours):hours	Z feet after 4 hours of pumping	

I HEREBY CERTIFY that the above statements are true to the best of	f my knowledge.	
GRENN WATER WELL & SUPPLY, INC. William Hardin, lic. no. 0-717P	William Handin	
Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer	·
	•	

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