

County: Claiborne

Permit #: 6616143

Driller: Griner Drilling Service

Date drilling completed: 1/6/2005

**Well Driller Report and Well Log**

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 #: N-48

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>Hermanville Water Association</u>	Latitude: _____ " Longitude: _____ "
Mailing Address: <u>PO Box 98</u>	Method of Lat/Long (circle one): <input type="radio"/> Conventional Survey, <input type="radio"/> USGS quad, <input type="radio"/> Hand-held GPS, <input type="radio"/> Survey-grade GPS
<u>Hermanville</u> MS 39086	<u>1/4</u> <u>1/4</u> Sec <u>5</u> Twn <u>11n</u> Rng <u>4e</u>
City State Zip Code	Distance Direction Nearest Town
Telephone No. <u>(601) 535-7007</u>	<u>0</u> Miles <u>south</u> of <u>hermanville</u>

**Well Data**

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

Date well drilling started: 10/27/2004 Date well drilling completed: 1/6/2005

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

Static Water Level: 138.5 feet above or (below) (circle one) land surface Date measured: 1/6/2005

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

Hole depth: 502 Well depth: 475 Well grouted to a depth of 385 feet

Type of grout (circle one): (Cement) Bentonite Mix

Casing length: 385 feet Casing diameter: 10 3/4 inches Type of casing: Steel

Screen length: 70 feet Screen diameter: 6 inches Type of screen: Stainless Steel Rod Base

Screen slot size: .020 inches Setting depth: From 395 feet to 465 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: 325 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): Griner Drilling Service, Inc.

**RECEIVED**

AUG 07 2006

BY: OLWF

Charles H. [Signature]  
 Signature of Water Well Contractor

Griner Drilling Service, Inc. 0-581  
 Print Name of Water Well Contractor and License No.

If well telescopes please sketch below and show depths



**STATE WELL REPORT**

**Part 2**

**Pump Installer's Completion Report**

County: <u>Claiborne</u>
Permit #: <u>GW 16143</u>
Driller: <u>Griner Drilling Service</u>
Date Completed: <u>6/6/2005</u>

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)

<b>For Office Use Only:</b>	
Aquifer: _____	_____
Well #: <u>N-48</u>	_____
Elevation: _____	_____

**This report must be prepared by the pump installer in detail and filed with the Department with 30 days of the installation of pump. A copy of Part 1 of this report must be attached to the report.**

<b>Well Owner Information</b>	<b>Well Location</b>
Owner Name <u>Hermanville Water Association</u>	Latitude: _____ Longitude: _____
Mailing Address <u>PO Box 98</u>	Method of Lat/Long (circle one): <u>Conventional Survey,</u>
<u>Hermanville</u> <u>MS</u> <u>39086</u>	<u>USGS quad, Hand-held GPS, Survey-grade GPS</u>
City State Zip Code	<u>1/4</u> <u>1/4</u> Sec <u>5</u> Twn <u>11n</u> Rng <u>4e</u>
Telephone No. <u>(601) 535-7007</u>	Distance Direction Nearest Town <u>0</u> Miles <u>south</u> of <u>Hermanville</u>

<b>Pump Type</b> Circle one	<b>Power Type</b> Circle one
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas
Bucket Piton (Turbine)	(Electric Motor) Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>50</u>
Date Pump Installed: <u>3/24/2005</u>	Setting Depth: <u>290</u> feet
Rated Pump Capacity: <u>250</u> Gallons per minute	Number of Stages: <u>15</u>

<b>Pump Test Data</b>	<b>Method of Measuring Water Level</b> Circle One
Date Well Tested: <u>1/6/2005</u>	Air Line (Electric Measuring Line) Steel Tape
Static Water Level (A): <u>138.5</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>246</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown {(B) - (A)}: <u>107.5</u> Feet Below Land Surface	Well yielded <u>275</u> GPM with a drawdown of
Test Pumping Rate: <u>275</u> Gallons Per Minute	<u>107.5</u> feet after <u>23</u> hours of pumping
Duration of Pump test (minimum 4 hours): <u>23</u> hours	

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

Griner Drilling Service, Inc. 0-581  
Print Name of Pump Installer and License No. (if applicable)

**RECEIVED**  
*Chad H. Griner*  
Signature of Pump Installer  
AUG 07 2006

**BY: OLWR**