

# 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 #: B-19  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: Sopch  
Permit #: \_\_\_\_\_  
Driller: GRENN WATER WELL & SUPPLY, INC.  
Date drilling completed: 12/1/05

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>Michael Graves</u>        | Latitude: <u>31° 58' 982"</u> Longitude: <u>90° 36' 332"</u><br><u>59</u> <u>20</u> |
| Mailing Address: <u>3081 Hoodtown Rd</u> | Method of Lat/Long (circle one): Conventional Survey,                               |
| <u>Utica MS 39175</u>                    | USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS                                  |
| City State Zip Code                      | <u>NE 1/4 SE 1/4 Sec 28 Twn 12N Rng 4W</u>  |
| Telephone No. <u>(601) 894-2361</u>      | Distance Direction Nearest Town<br><u>3</u> Miles <u>NW</u> of <u>Dentonville</u>   |

Well Data

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

Date well drilling started: 12/1/05 Date well drilling completed: 12/1/05

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

Static Water Level: 125 feet above or below (circle one) land surface Date measured: 12/1/05

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

Hole depth: 270 Well depth: 260 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 250 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 10 feet Screen diameter: 4 inches Type of screen: PVC

Screen slot size: .010 inches Setting depth: From 250 feet to 260 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: \_\_\_\_\_

Name of organization running log(s): \_\_\_\_\_

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.

GRENN WATER WELL & SUPPLY, INC.

Brian McClendon, lic. no. 0-664

Print Name of Water Well Contractor and License No.

Brian McClendon  
Signature of Water Well Contractor

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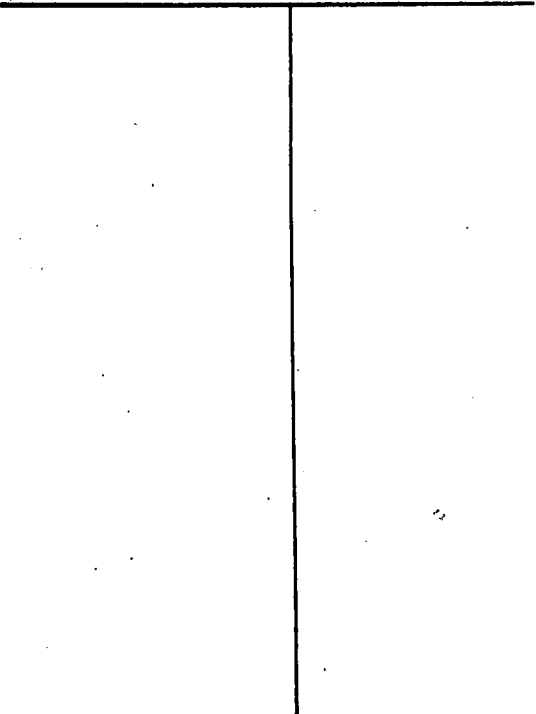
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BY: OLWR

If well telescopes please sketch below and show depths.

B-

Ground Level



| Description of Formations Encountered | From | To  |
|---------------------------------------|------|-----|
| red clay                              | 0    | 14  |
| sand                                  | 14   | 21  |
| white clay                            | 21   | 48  |
| blue clay                             | 48   | 232 |
| sand                                  | 232  | 260 |
| blue clay                             | 260  | 270 |
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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) indicate direction.

W ————— road ————— E

drive | gate

x well

trailer

Landowner Name: Michael Graves

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

Brian McClendon  
Signature of Water Well Contractor

# STATE WELL REPORT

## Part 2

Pump Installer's Completion Report  
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 #: B-19

Elevation: \_\_\_\_\_

County: Copiah  
Permit #: \_\_\_\_\_  
Driller: GRENN WATER WELL & SUPPLY, INC.  
Date completed: 12/2/05

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

| Well Owner Information                   | Well Location  |
|--|--|
| Owner Name: <u>Michael Graves</u>        | Latitude: <u>N 31° 58' 98.2"</u> Longitude: <u>W 90° 36' 33.2"</u> |
| Mailing Address: <u>3081 Hoodfawn Rd</u> | Method of Lat/Long (circle one): Conventional Survey,              |
| <u>Utica MS 39175</u>                    | USGS quad: <u>Hand-held GPS</u> , Survey-grade GPS                 |
| City State Zip Code                      | <u>NE 1/4 SE 1/4 Sec 28 Twn 12N Rng 4W</u>                         |
| Telephone No. <u>(601) 894-2361</u>      | Distance Direction Nearest Town<br><u>3 Miles NW of Dentville</u>  |

| Pump Type<br>Circle one                               | Power Type<br>Circle one                  |
|---|---|
| Air Lift Jet <input type="radio"/> <u>Submersible</u> | Diesel Engine Gasoline Engine Natural Gas |
| Bucket Piston Turbine                                 | <u>Electric Motor</u> Hand Tractor PTO    |
| Centrifugal Rotary Flowing Well                       | Windmill Other (specify): _____           |
| Other (specify): _____                                | Horse Power Rating of Motor: <u>1</u>     |
| Date Pump Installed: <u>12/02/05</u>                  | Setting Depth: <u>160</u> feet            |
| Rated Pump Capacity: <u>10</u> Gallons Per Minute     | Number of Stages: <u>15</u>               |

| Pump Test Data  | Method of Measuring Water Level<br>Circle one                            |
|---|--|
| Date Well Tested: <u>12/2/05</u>                            | Air Line <input type="radio"/> <u>Electric Measuring Line</u> Steel Tape |
| Static Water Level (A): <u>125</u> Feet Below Land Surface  | Other (specify): _____   |
| Pumping Water Level (B): <u>132</u> Feet Below Land Surface | For flowing well, measured shut in head: _____ feet                      |
| Drawdown [(B) - (A)]: <u>7</u> Feet Below Land Surface      | Well yielded <u>11</u> GPM with a drawdown of                            |
| Test Pumping Rate: <u>11</u> Gallons Per Minute             | <u>7</u> feet after <u>4</u> hours of pumping                            |
| Duration of Pump Test (minimum 4 hours): <u>4</u> hours     |  |

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

GRENN WATER WELL & SUPPLY, INC.  
William Hardin, lic. no. 0-717P

Print Name of Pump Installer and License No. (if applicable)

William Hardin  
Signature of Pump Installer

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BY: OLWR