

11027

Well Driller Report and Well Log

City: Copiah

Permit #: 16027

Driller: Ken Buchanan

Date drilling completed: 10/23/2005

Mississippi Department of Environmental Quality
 Office of Land and Water Resources
 P.O. Box 10631
 Jackson, MS 39289-0631
 (601) 981-5210
 (601) 354-6938 (fax)

For Office Use Only:

Aquifer: _____

Well #: B-16

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>Reedtown Water Association</u>	Latitude: _____ Longitude: _____
Mailing Address: <u>PO Box 223</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>
<u>Utica, MS 39175</u>	USGS quad, Hand-held GPS, Survey-grade GPS
City: _____ State: _____ Zip Code: _____	nw 1/4 sw 1/4 Sec 5 Twn 12n Rng 4w
Telephone No. () _____	Distance: <u>4 Miles</u> Direction: <u>south</u> of Nearest Town: <u>Utica</u>

Well Data

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

Date well drilling started: 5/10/2004 Date well drilling completed: 10-23-05

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

Static Water Level: 99.93 feet above or (below) (circle one) land surface Date measured: 11/18/05

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

Hole depth: 355 Well depth: 350 Well grouted to a depth of 200 feet

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

Casing length: 200 feet Casing diameter: 20 inches Type of casing: steel

Screen length: 80 feet Screen diameter: 10 inches Type of screen: rod base

Screen slot size: 0.02 inches Setting depth: From 210 feet to 350 feet

Type of completion (circle all applicable): (Gravel packed) (Underreamed) Telescoped Open hole Natural development

Other (describe): Blank 250-310

Top of lap pipe or reduction in casing: 130 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): _____

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BY: OLWR

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.

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

Chad H. R...
 Signature of Water Well Contractor

If well telescopes please sketch below and show depths