

STATE WELL REPORT

Part 2

Pump Installer's Completion Report
 Mississippi Department of Environmental Quality
 Office of Land and Water Resources
 P.O. Box 2309
 Jackson, MS 39225-2309
 (601)961-5210
 (601) 360-0535 (fax)

For Office Use Only:

Well #: R39
 Aquifer: _____

County: Copiah
 Permit #: GW16988
 Driller: Griner Drilling Service, Inc.
 Date completed: 06/18/13
Copy information from block on Part 1

This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part 1 of the report must be attached and both parts filed with the Department at the above address within 30 days of well completion.

Well Owner Information	Well Location
Owner Name: <u>Town of Georgetown</u>	Latitude: <u>31 52' 5.33"N</u> Longitude: <u>90 10' 6.92"W</u>
Mailing Address: <u>1048 Poplar Street</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS <u>X</u> , Survey-grade GPS _____
<u>Georgetown</u> MS <u>39078</u>	<u>NE 1/4 SW 1/4, Sec 2 T 10N R 1E</u>
City State Zip Code	<u>1/2</u> Miles <u>SW</u> of <u>Georgetown</u>
Telephone No. (____) _____	(Distance) (Direction) (Nearest Town)

Pump Type (circle one)

Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe): _____

Date Pump Installed: 04/05/13 Rated Pump Capacity: 100 Gallons Per Minute

Is This Pump (circle one): New Repaired Replacement

Power Type (circle one)

Electric Diesel Gasoline Natural Gas Tractor PTO Windmill Other (describe): _____

Horse Power Rating of Motor: 7.5 Setting Depth: 60 feet Number of Stages: 4

Pump Test Data for Non Flowing Well

Date Well Tested: 02/05/13 Duration of Pump Test (minimum 4 hours): 24 hours

Static Water Level (A): 14.06 Feet Below Land Surface Pumping Water Level (B): 33.25 Feet Below Land Surface

Drawdown [(B) - (A)]: 19.19 Feet Below Land Surface Test Pumping Rate: 130 Gallons Per Minute

Method of measurement (circle one): Steel tape Electric tape Air line Other (describe): _____

Pump Test Data for Flowing Well

Measured shut in head: _____ feet.

Well yielded 130 GPM with a drawdown of 19.19 feet after 24 hours of pumping

Meter Installation

Meter Manufacturer: Water Specialties Meter Serial Number: 20130619

Meter Model Number/Name: ML-04 Type of Meter: Flanged Tube Meter

Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): _____

Installation Date: 04/30/13 Meter installed by: Griner Drilling Service, Inc.

Is This Meter (circle one): New Repaired Replacement

Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.

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

Charles H. Griner Sr. 6844 06/18/13 Charles H. Griner
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer

Copiach Co.

R39



Fire Dept Dr

Georgetown Well No. 6

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Google earth

Imagery Date: 3/25/2012 31°52'04.96" N 90°10'07.03" W elev 238 ft eye alt 583 ft