

STATE WELL REPORT

Part 1

Driller's Log

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225-2309
(601)961-5555
(601)961-5228 (fax)

For Office Use Only:

Well #: E168
Aquifer: _____
E-Log #: _____

County: Desoto
Permit #: MS-610-17146
Driller: Griner Drilling
Date drilling completed: 6-17

State Law requires that this report be prepared by the license holder responsible for the work and filed with the Department at the above address within 30 days of completion of drilling of the well or borehole.

Well Owner Information <small>(Landowner if borehole is not for a water well)</small>	Well or Borehole Location
Owner Name: <u>City of Horn Lake</u>	Latitude: <u>34° 56' 51.2" N</u> Longitude: <u>90° 04' 58.18" W</u>
Mailing Address: <u>3101 Goodman Rd</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS _____, Survey-grade GPS <input checked="" type="checkbox"/>
<u>Horn Lake</u> <u>MS</u> <u>38637</u>	<u>NE^{NW} 1/4 NE 1/4</u> , Sec <u>6</u> T. <u>2S</u> R. <u>8W</u>
City State Zip Code	Miles <u>W</u> of <u>Horn Lake</u>
Telephone No. (662) <u>393-6178</u>	(Distance) (Direction) (Nearest Town)

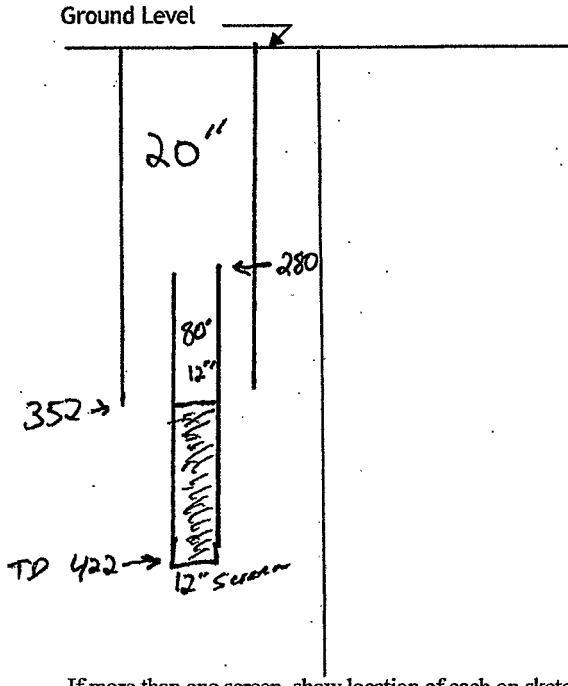
Well / Borehole Data
Date drilling started: <u>4-16</u> Date drilling completed: <u>5-16</u> Hole depth: <u>435</u> Hole diameter: <u>20</u>
Location of the source of any surface water used for drilling: <u>Public Water Supply</u>
Method of dosing and volume of Chlorine used in drilling and development: <u>NA</u>
Logs run (check all applicable): <input checked="" type="checkbox"/> log run <input checked="" type="checkbox"/> Electric <input checked="" type="checkbox"/> Gamma Ray <input type="checkbox"/> Density <input type="checkbox"/> Sonic <input type="checkbox"/> Neutron <input type="checkbox"/> Other: RECEIVED
Name of organization running log(s): <u>Griner Drilling</u>
Purpose of borehole (check one): Water Well <input checked="" type="checkbox"/> Geotechnical/Geological Investigation <input type="checkbox"/> Ground Source Heat Pump <input type="checkbox"/> Seismic Survey <input type="checkbox"/> Other (describe) _____ JUN 20 2017 BY OLWR
<i>If drilling is not related to water well construction, skip the remainder of this block</i>
Purpose of Well (check all applicable): <input type="checkbox"/> Home <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Public Supply <input type="checkbox"/> Irrigation <input type="checkbox"/> Fish Culture
Other (describe): _____
If a flowing well, method of flow regulation: Valve _____ Other (describe) _____
Static Water Level: <u>108</u> feet <input type="checkbox"/> above or <input checked="" type="checkbox"/> below land surface Date measured: <u>6-16-2016</u> (check one)
Method of measurement (check one) <input type="checkbox"/> Steel tape <input checked="" type="checkbox"/> Electric tape <input type="checkbox"/> Air line <input type="checkbox"/> Other (describe): _____
Well depth: <u>422</u> Well grouted to a depth of: <u>352</u> feet Type of grout (check one) <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Mix
Casing length: <u>352</u> feet Casing diameter: <u>20</u> inches Type of casing: <u>Black Steel</u>
Screen length: <u>60</u> feet Screen diameter: <u>12</u> inches Type of screen: <u>stainless wire</u>
Screen slot size: <u>.020</u> inches Setting depth: From <u>362</u> feet to <u>422</u> feet
Type of completion (check all applicable) <input checked="" type="checkbox"/> gravel packed <input type="checkbox"/> Underreamed <input type="checkbox"/> Open hole <input type="checkbox"/> Natural Development
Other (describe): _____
Top of lap pipe or reduction in casing: <u>280</u> feet
<i>If telescoped or more than one screen, describe on next page</i>

County: Desoto
Permit #: _____

For Office Use Only:
Well #: F168

The sketch below only required for water wells

If well telescopes, show depths on sketch.

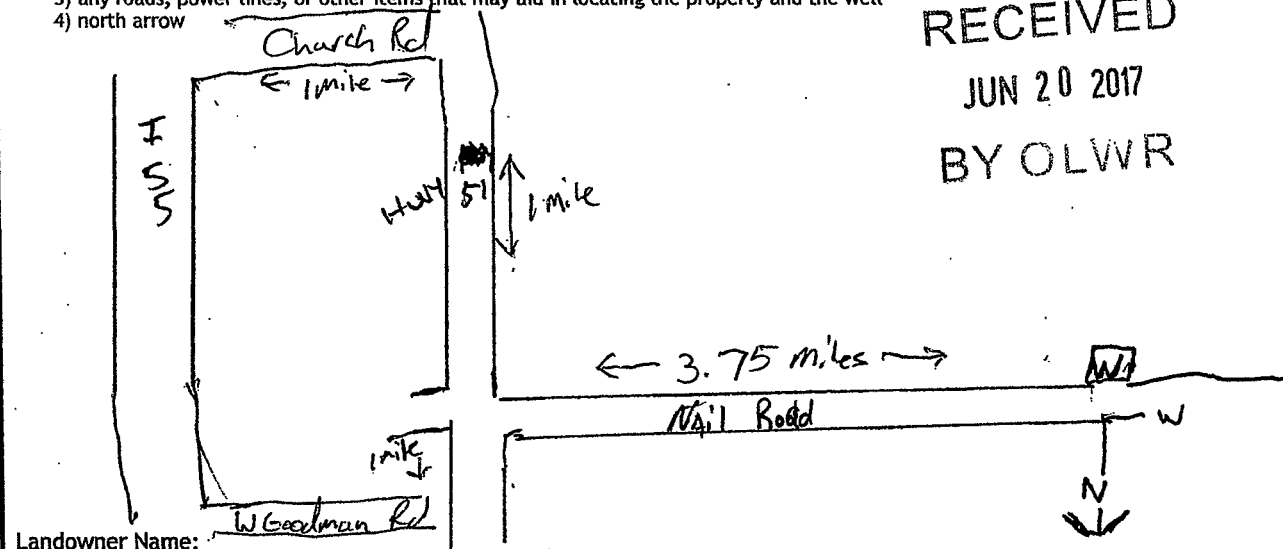


Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth)	To (depth)
<u>Topsoil</u>	Ground level	
<u>Top soil</u>	0	6'
<u>Red sandy</u>	6	20'
<u>Sandy clay</u>	20	80
<u>Sand</u>	80	115
<u>Clay</u>	115	172
<u>Sand</u>	172	204
<u>Grey Clay</u>	204	360
<u>Sand</u>	360	426
<u>Clay Grey</u>	426	435

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) north arrow



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JUN 20 2017
BY OLWR

Landowner Name: _____

I HEREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state laws.

Ryan Herndon UNR0000-7000
Print Name of Responsible Licensee and License No.

6-21-17
Date

Signature of Licensee

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 #: F168

Aquifer: _____

County: Desoto
 Permit #: _____
 Driller: Griner
 Date completed: 6-17
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>City of Horn Lake</u>	Latitude: <u>34°56'51.72"N</u> Longitude: <u>90°04'58.18"W</u>
Mailing Address: _____ <u>3101 Goodman Rd</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
<u>Horn Lake</u> <u>MS</u> <u>38637</u>	<u>NE</u> ^{NW} <u>1/4</u> <u>NE</u> <u>1/4</u> , Sec <u>6</u> T <u>2</u> S R <u>8</u> W
City _____ State _____ Zip Code _____	_____ Miles <u>W</u> of <u>Horn Lake</u>
Telephone No. (<u>662</u>): <u>393-6178</u>	(Distance) _____ (Direction) _____ (Nearest Town)

Pump Type (check one)

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

Date Pump Installed: 1-16-17 Rated Pump Capacity: 1000 Gallons Per Minute

Is This Pump (check one): New Repaired Replacement

Power Type (check one)

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

Horse Power Rating of Motor: 50 Setting Depth: 220 feet Number of Stages: 3

Pump Test Data for Non Flowing Well

Date Well Tested: 4-7-2017 Duration of Pump Test (minimum 4 hours): 8 hours

Static Water Level (A): 110 Feet Below Land Surface Pumping Water Level (B): 160 Feet Below Land Surface

Drawdown [(B) - (A)]: 50 Feet Below Land Surface Test Pumping Rate: 1050 Gallons Per Minute

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

Pump Test Data for Flowing Well

Measured shut in head: 208 feet.

Well yielded 1050 GPM with a drawdown of 50 feet after 4 hours of pumping

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JUN 20 2017

Meter Installation

Meter Manufacturer: Water Speciales Meter Serial Number: _____

Meter Model Number/Name: M204TR1 Type of Meter: Propeller

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

Installation Date: 3-17 Meter installed by: Cleveland Construction

Is This Meter (check 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

Ryan Herndon UNK 0000-700 6-21-17 _____
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer

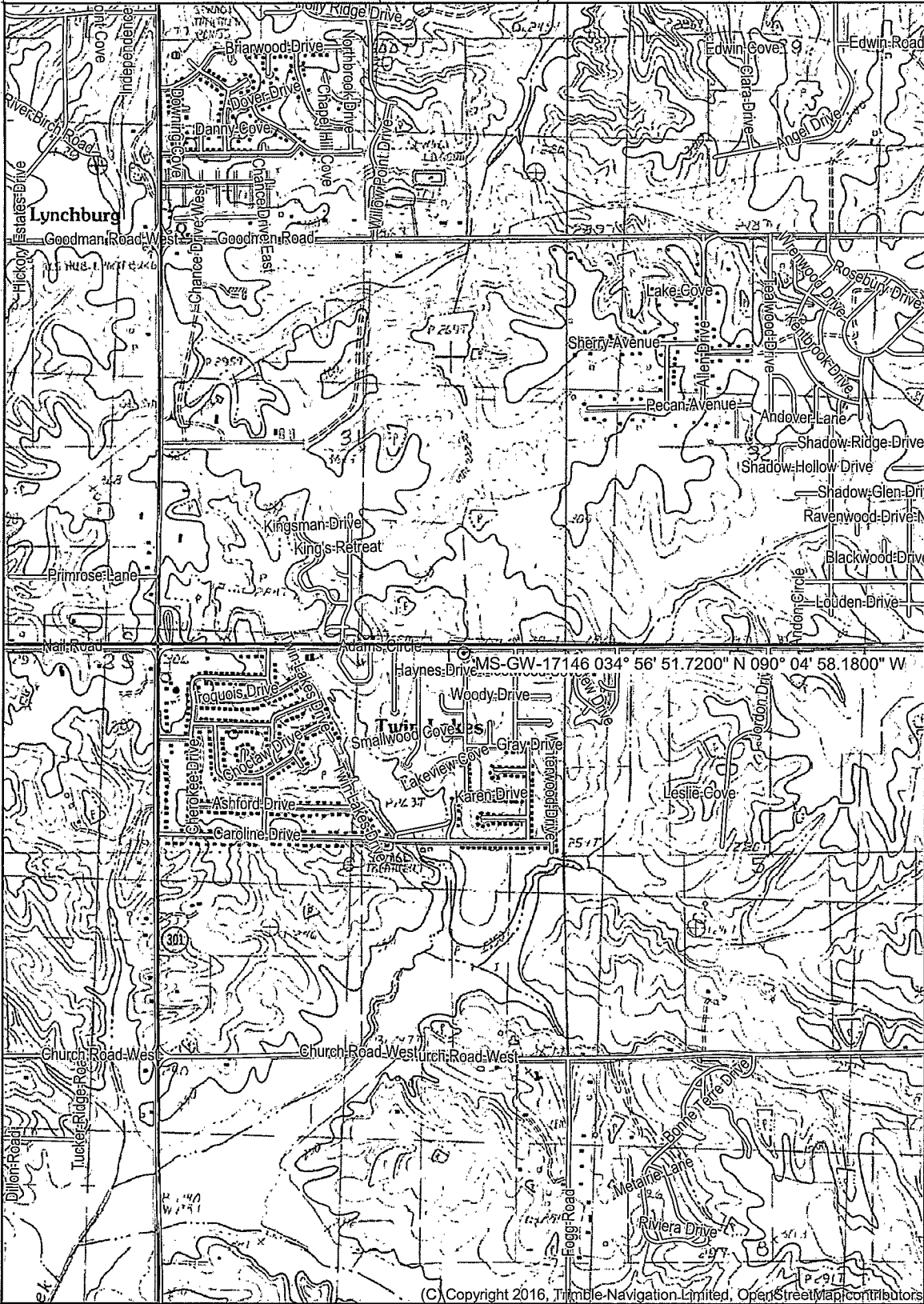
090° 06' 10.1098" W
034° 58' 15.2465" N

(Outdoor Contour Map)

090° 03' 45.7633" W
034° 58' 15.2465" N

(LAKE CORMORANT)

(MOGG MT)



034° 55' 27.6440" N
090° 06' 10.1098" W

Printed: Thu Feb 08, 2018

034° 55' 27.6440" N
090° 03' 45.7633" W

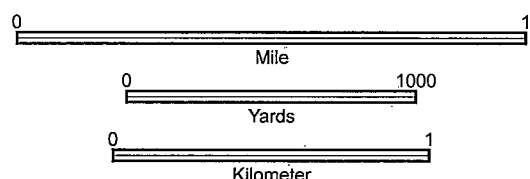
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(BANKS)

(HERNANDO)

Declination

(FREES CORNERS)
SCALE 1:24000



CONTOUR INTERVAL 10 FT

Produced by Trimble Terrain Navigator Pro
Topography based on USGS 1:24,000
Maps

North American 1983 Datum (NAD83)

To place on the predicted North American
1927 move the projection lines 11M N and
8M W

GN 1.66° E
MN 1.28° W

34090-H1-TM-024
HORN LAKE, MS
JAN 1, 1982