

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)961-5210
(601)360-0535 (fax)

0180005-06

County: <u>Forrest</u>
Permit #: <u>GW16812</u>
Driller: <u>Griner Drilling Service, Inc</u>
Date drilling completed: <u>April 22, 2013</u>

For Office Use Only:
Well #: <u>F78</u>
Aquifer: _____
E-Log #: _____

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.

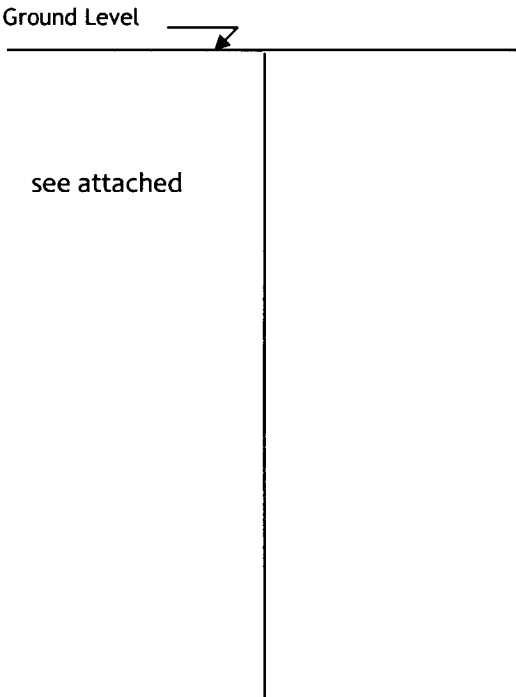
Well Owner Information <i>(Landowner if borehole is not for a water well)</i>	Well or Borehole Location
Owner Name: <u>Dixie Community Utility Association</u>	Latitude: <u>31 12'37.47" N</u> Longitude: <u>89 18'58.93" W</u>
Mailing Address: <u>500 Elks Lake Road</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
Hattiesburg Mississippi 39401	<u>SE 1/4 NE 1/4</u> , Sec <u>20</u> T <u>3N</u> R <u>13W</u>
City State Zip Code	<u>5</u> Miles <u>west</u> of <u>Hattiesburg</u>
Telephone No. (<u>601</u>) <u>582-5039</u>	(Distance) (Direction) (Nearest Town)

Well / Borehole Data
Date drilling started: <u>March 18</u> Date drilling completed: <u>April 22</u> Hole depth: <u>1120'</u> Hole diameter: <u>18.5"</u>
Location of the source of any surface water used for drilling: <u>Dixie Community Utility Association</u>
Method of dosing and volume of Chlorine used in drilling and development: _____
Logs run (circle all applicable): No 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: _____
Name of organization running log(s): <u>Griner Drilling Service, Inc</u>
Purpose of borehole (circle 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) _____
<i>If drilling is not related to water well construction, skip the remainder of this block</i>
Purpose of Well (circle all applicable): Home <input type="checkbox"/> Industrial <input type="checkbox"/> Public Supply <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Fish Culture <input type="checkbox"/>
Other (describe): _____
If a flowing well, method of flow regulation: Valve _____ Other (describe) _____
Static Water Level: <u>277</u> feet [above or <input checked="" type="checkbox"/> below] land surface Date measured: <u>May 2, 2013</u> (circle one)
Method of measurement (circle one): Steel tape <input checked="" type="checkbox"/> Electric tape <input type="checkbox"/> Air line <input type="checkbox"/> Other (describe): _____
Well depth: <u>1035'</u> Well grouted to a depth of: <u>980</u> feet Type of grout (circle one): Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Mix <input checked="" type="checkbox"/>
Casing length: <u>980</u> feet Casing diameter: <u>12.75</u> inches Type of casing: <u>Steel</u>
Screen length: <u>45</u> feet Screen diameter: <u>8.625</u> inches Type of screen: <u>Munipak</u>
Screen slot size: <u>.020</u> inches Setting depth: From <u>990</u> feet to <u>1035</u> feet
Type of completion (circle 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>870</u> feet
<i>If telescoped or more than one screen, describe on next page</i>

County: _____
 Permit #: _____

For Office Use Only:
 Well #: F78

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)
Streaky sand & clay	Ground level	200
Clay	200	380
Sand	380	580
Clay	580	750
Sand	750	900
Clay	900	970'
Sand	970	1150
1060'-1150' is colored (turbid water)		

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

Google Earth Attached

Landowner Name: Dixie Community Utility Association

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.

Charles H. Griner 0-184 December 7, 2013 _____
 Print Name of Responsible Licensee and License No. 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)

County: Forrest
 Permit #: _____
 Driller: Griner Drilling Service
 Date completed: April 22, 2013
Copy information from block on Part 1

For Office Use Only:

Well #: F78
 Aquifer: _____

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>Dixie Community Utility Association</u>	Latitude: <u>31 12'37.47"N</u> Longitude: <u>89 18'58.93"W</u>
Mailing Address: <u>500 Elks Lake Road</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, <input checked="" type="checkbox"/> Hand-held GPS _____, Survey-grade GPS _____
<u>Hattiesburg</u> Mississippi <u>39401</u>	<u>SE 1/4 NE 1/4</u> , Sec <u>20</u> T <u>3N</u> R <u>13W</u>
City State Zip Code	<u>5</u> Miles <u>west</u> of <u>Hattiesburg</u>
Telephone No. (<u>601</u>) <u>582-5039</u>	(Distance) (Direction) (Nearest Town)

Pump Type (circle one)

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

Date Pump Installed: April 15, 2013 Rated Pump Capacity: 500 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: 75 Setting Depth: 350 feet Number of Stages: 8

Pump Test Data for Non Flowing Well

Date Well Tested: May 2, 2013 Duration of Pump Test (minimum 4 hours): 8 hours

Static Water Level (A): 277 Feet Below Land Surface Pumping Water Level (B): 308 Feet Below Land Surface

Drawdown [(B) - (A)]: 31 Feet Below Land Surface Test Pumping Rate: 500 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 _____ GPM with a drawdown of _____ feet after _____ hours of pumping

Meter Installation

Meter Manufacturer: McCrometer Meter Serial Number: 2013***-6

Meter Model Number/Name: ML-04 Type of Meter: Turbine

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

Installation Date: July 17, 2013 Meter installed by: Griner Drilling Service, Inc

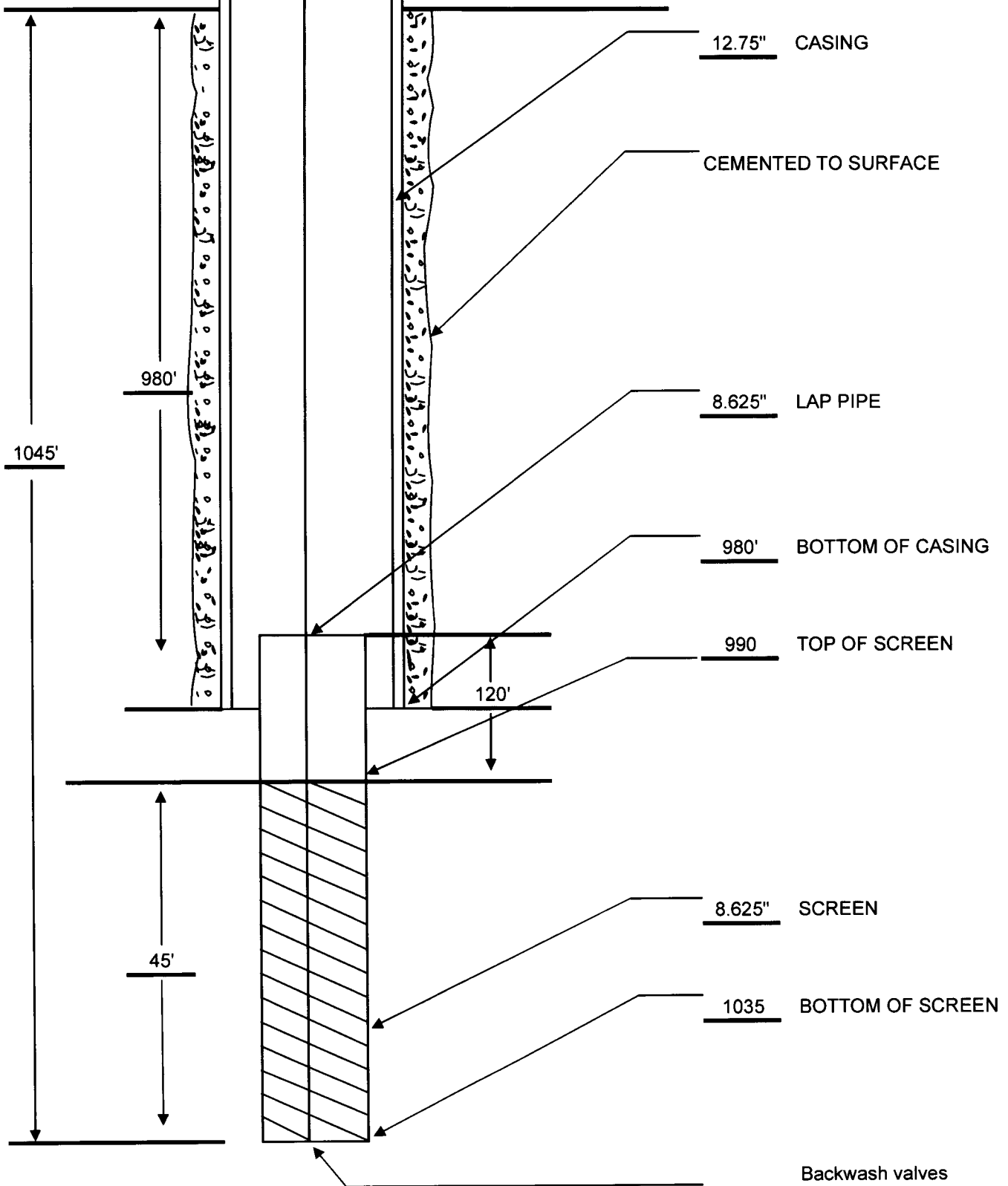
Is This Meter (circle one): New Repaired Replacement

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.

Griner Drilling Service, Inc. 0-184 12/07/13
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer

Dixie Community Utility Association
Potable Water Well 2013
Browns Bridge Road Treatment Plant



12.75" CASING

CEMENTED TO SURFACE

8.625" LAP PIPE

980' BOTTOM OF CASING

990 TOP OF SCREEN

120'

8.625" SCREEN

1035 BOTTOM OF SCREEN

Backwash valves

1045'

980'

45'