

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)

For Office Use Only:

Well #: J0083
Aquifer: MOCN
E-Log #: _____

County: Franklin
Permit #: MS-GW-17252
Driller: Griner Drilling Service, Inc.
Date drilling completed: Oct. 2016

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>Town of Bude</u>	Latitude: <u>N 31° 29' 06"</u> Longitude: <u>W 90° 50' 33.5"</u>
Mailing Address: <u>P.O. Box 448</u>	Method of Lat/Long (check one): Conventional Survey <input checked="" type="checkbox"/> , USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
<u>Bude</u> MS <u>39630</u>	<u>NW 1/4 SE 1/4, Sec 19 T 6-N R 4-E</u>
City State Zip Code	<u>1/2</u> Miles <u>NE</u> of <u>Bude</u>
Telephone No. (601) <u>384-2600</u>	(Distance) (Direction) (Nearest Town)

Well / Borehole Data

Date drilling started: 7/14/16 Date drilling completed: 10/16 Hole depth: 300' Hole diameter: 2"

Location of the source of any surface water used for drilling: Town of Bude - 2" Outlet @ Standpipe

Method of dosing and volume of Chlorine used in drilling and development: _____

Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: _____

Name of organization running log(s): Griner Drilling Service, Inc.

Purpose of borehole (circle one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump
 Seismic Survey Other (describe) _____

If drilling is not related to water well construction, skip the remainder of this block

Purpose of Well (circle all applicable): Home Industrial Public Supply Irrigation Fish Culture

Other (describe): _____

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

Static Water Level: 87.37 feet [above or below] and surface Date measured: 10/11/2016
(circle one)

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

Well depth: 230' Well grouted to a depth of: 148 feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 151 feet Casing diameter: 16 inches Type of casing: Coated Steel

Screen length: 50 feet Screen diameter: 10 inches Type of screen: Stainless Steel

Screen slot size: 0.030 inches Setting depth: From 178 feet to 228 feet

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

Other (describe): _____

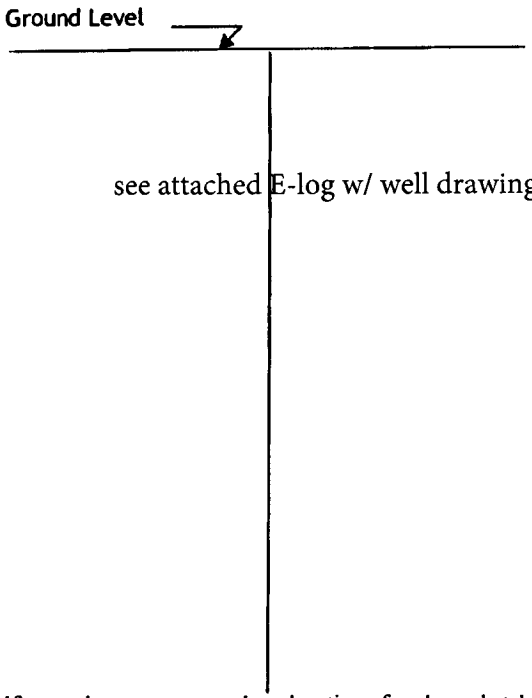
Top of lap pipe or reduction in casing: 80 feet

If telescoped or more than one screen, describe on next page

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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)
Clay - Gravel	Ground level	20
Clay - Sand - Clay	20	40
Clay	40	120
Clay - Sand	120	140
Sand	140	200
Sand - Gravel	200	240
Sand - Clay	240	260
Clay -- Sand Streaks	260	300

If more than one screen, show location of each on sketch

Sketch the property layout and include the following:

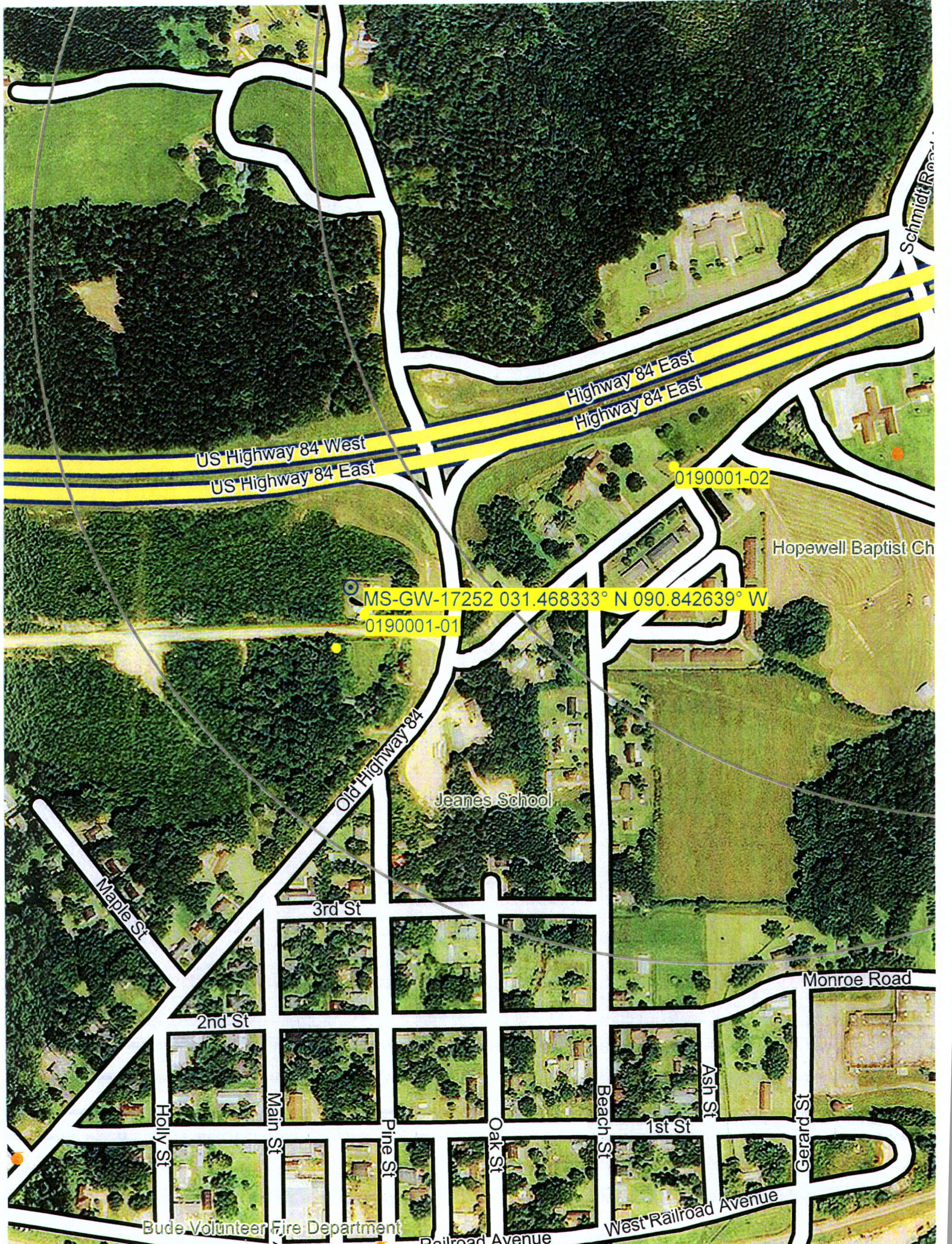
- 1) the well location
- 2) any permanent structures on the property that may aid in locating the well
- 3) any roads, power lines, or other items that may aid in locating the property and the well
- 4) north arrow

See attached drawing

Landowner Name: Town of Bude, Earl Case, Mayor

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.

Brock White 25487 1/31/17 Brock White
 Print Name of Responsible Licensee and License No. Date Signature of Licensee



US Highway 84 West
US Highway 84 East

Highway 84 East
Highway 84 East

MS-GW-17252 031.468333° N 090.842639° W
0190001-01

0190001-02

Old Highway 84

Jeanes School

Hopewell Baptist Ch

Maple St

3rd St

2nd St

Holly St

Main St

Pine St

Oak St

Beach St

1st St

Ash St

Gerard St

Monroe Road

Bude Volunteer Fire Department

Railroad Avenue

West Railroad Avenue

Schmidt Road

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 #: J0083

Aquifer: MOCN

County: <u>Franklin</u>
Permit #: <u>MS-GW-17252</u>
Driller: <u>Griner Drilling Service, Inc</u>
Date completed: <u>Jan. 2017</u>
<u>Copy information from block on Part 1</u>

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 Bude</u>	Latitude: <u>N31°28'06"</u> Longitude: <u>W90°50'33.5"</u>
Mailing Address: <u>P.O. Box 448</u>	Method of Lat/Long (check one): Conventional Survey <input checked="" type="checkbox"/> , USGS quad _____, Hand-held GPS _____, Survey-grade GPS _____
<u>Bude</u> MS <u>39630</u>	<u>NW</u> ¼ <u>SE</u> ¼, Sec <u>19</u> T <u>4-N</u> R <u>4-E</u>
City State Zip Code	<u>1/2</u> Miles <u>NE</u> of <u>Bude</u>
Telephone No. () _____	(Distance) (Direction) (Nearest Town)

Pump Type (circle one)
Submersible <input checked="" type="checkbox"/> <u>Turbine</u> Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe): _____
Date Pump Installed: _____ Rated Pump Capacity: <u>500</u> Gallons Per Minute
Is This Pump (circle one): <input checked="" type="checkbox"/> <u>New</u> Repaired Replacement

Power Type (circle one)
<input checked="" type="checkbox"/> <u>Electric</u> Diesel Gasoline Natural Gas Tractor PTO Windmill Other (describe): _____
Horse Power Rating of Motor: <u>40</u> Setting Depth: <u>115</u> feet Number of Stages: <u>3 Phase</u>

Pump Test Data for Non Flowing Well
Date Well Tested: _____ Duration of Pump Test (minimum 4 hours): _____ hours
Static Water Level (A): _____ Feet Below Land Surface Pumping Water Level (B): _____ Feet Below Land Surface
Drawdown [(B) - (A)]: _____ Feet Below Land Surface Test Pumping Rate: _____ Gallons Per Minute
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe): _____

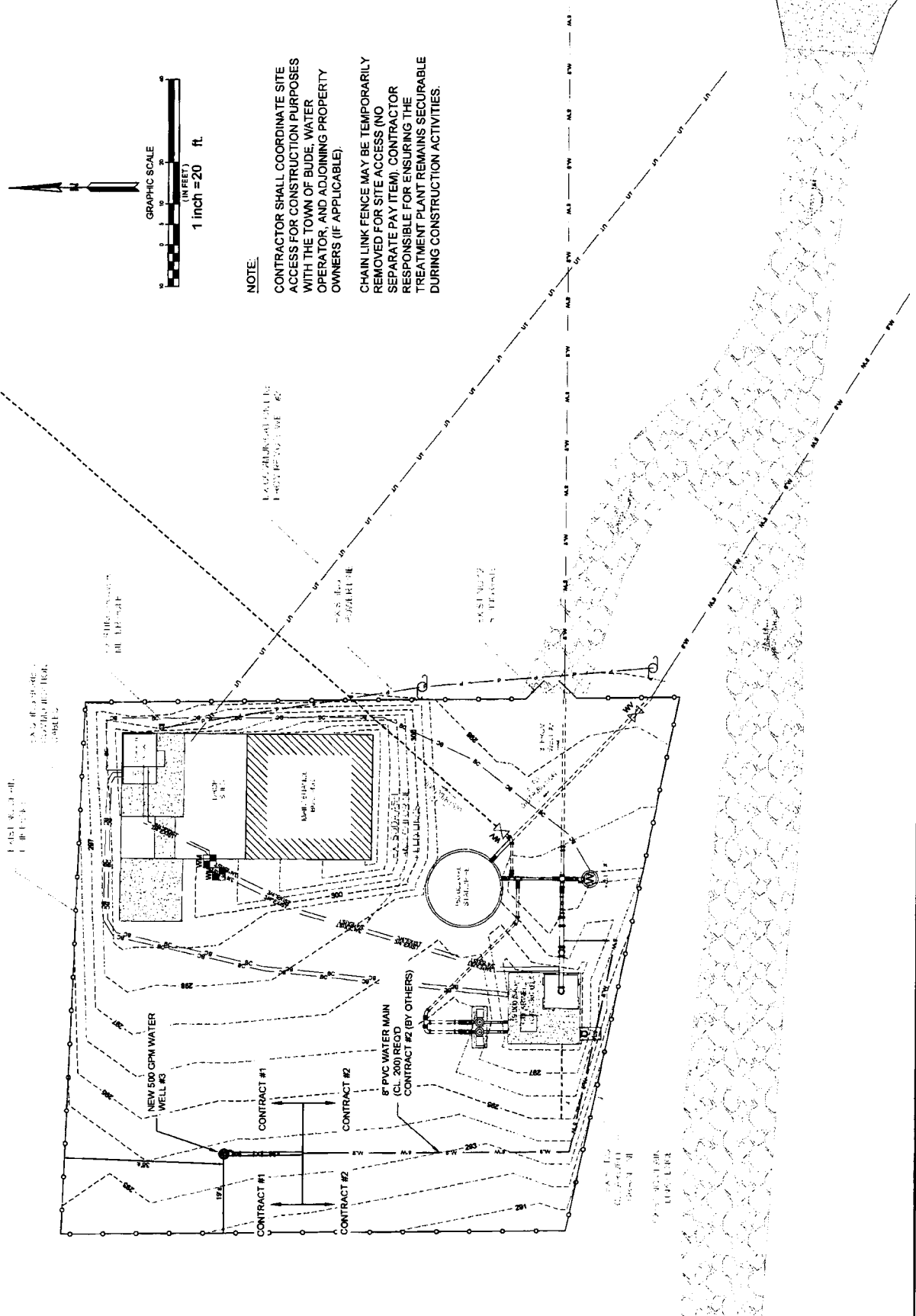
Pump Test Data for Flowing Well
Measured shut in head: _____ feet.
Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping

Meter Installation
Meter Manufacturer: <u>Water Specialties</u> Meter Serial Number: _____
Meter Model Number/Name: <u>M204-08</u> Type of Meter: <u>Flanged Tube, Propeller</u>
Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): <u>gal x 1000</u>
Installation Date: <u>1/27/16</u> Meter installed by: <u>T.L. Wallace</u>
Is This Meter (circle one): <input checked="" type="checkbox"/> <u>New</u> Repaired Replacement
<i>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>

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.		
Charles H. Griner	0-184	1/31/17
Print Name of Pump Installer and License No. (if applicable)	Date	<u>Charles H. Griner</u> Signature of Pump Installer

BUNGRAN
 engineering
 120 EAST CHICKASAW STREET BROOKHAVEN, MS 39501
 (701) 823-7026 (F) 601 855-1618

NO.	DATE	REVISION
1	12/07/2013	ISSUE FOR PERMIT
2	01/08/2014	ISSUE FOR BIDDING
3	01/20/2014	ISSUE FOR CONSTRUCTION
4	02/20/2014	ISSUE FOR AS-BUILT



NOTE:
 CONTRACTOR SHALL COORDINATE SITE ACCESS FOR CONSTRUCTION PURPOSES WITH THE TOWN OF BUDE, WATER OPERATOR, AND ADJOINING PROPERTY OWNERS (IF APPLICABLE).
 CHAIN LINK FENCE MAY BE TEMPORARILY REMOVED FOR SITE ACCESS (NO SEPARATE PAY ITEM). CONTRACTOR RESPONSIBLE FOR ENSURING THE TREATMENT PLANT REMAINS SECURABLE DURING CONSTRUCTION ACTIVITIES.

1-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-100-101-102-103-104-105-106-107-108-109-110-111-112-113-114-115-116-117-118-119-120-121-122-123-124-125-126-127-128-129-130-131-132-133-134-135-136-137-138-139-140-141-142-143-144-145-146-147-148-149-150-151-152-153-154-155-156-157-158-159-160-161-162-163-164-165-166-167-168-169-170-171-172-173-174-175-176-177-178-179-180-181-182-183-184-185-186-187-188-189-190-191-192-193-194-195-196-197-198-199-200-201-202-203-204-205-206-207-208-209-210-211-212-213-214-215-216-217-218-219-220-221-222-223-224-225-226-227-228-229-230-231-232-233-234-235-236-237-238-239-240-241-242-243-244-245-246-247-248-249-250-251-252-253-254-255-256-257-258-259-260-261-262-263-264-265-266-267-268-269-270-271-272-273-274-275-276-277-278-279-280-281-282-283-284-285-286-287-288-289-290-291-292-293-294-295-296-297-298-299-300-301-302-303-304-305-306-307-308-309-310-311-312-313-314-315-316-317-318-319-320-321-322-323-324-325-326-327-328-329-330-331-332-333-334-335-336-337-338-339-340-341-342-343-344-345-346-347-348-349-350-351-352-353-354-355-356-357-358-359-360-361-362-363-364-365-366-367-368-369-370-371-372-373-374-375-376-377-378-379-380-381-382-383-384-385-386-387-388-389-390-391-392-393-394-395-396-397-398-399-400-401-402-403-404-405-406-407-408-409-410-411-412-413-414-415-416-417-418-419-420-421-422-423-424-425-426-427-428-429-430-431-432-433-434-435-436-437-438-439-440-441-442-443-444-445-446-447-448-449-450-451-452-453-454-455-456-457-458-459-460-461-462-463-464-465-466-467-468-469-470-471-472-473-474-475-476-477-478-479-480-481-482-483-484-485-486-487-488-489-490-491-492-493-494-495-496-497-498-499-500-501-502-503-504-505-506-507-508-509-510-511-512-513-514-515-516-517-518-519-520-521-522-523-524-525-526-527-528-529-530-531-532-533-534-535-536-537-538-539-540-541-542-543-544-545-546-547-548-549-550-551-552-553-554-555-556-557-558-559-560-561-562-563-564-565-566-567-568-569-570-571-572-573-574-575-576-577-578-579-580-581-582-583-584-585-586-587-588-589-590-591-592-593-594-595-596-597-598-599-600-601-602-603-604-605-606-607-608-609-610-611-612-613-614-615-616-617-618-619-620-621-622-623-624-625-626-627-628-629-630-631-632-633-634-635-636-637-638-639-640-641-642-643-644-645-646-647-648-649-650-651-652-653-654-655-656-657-658-659-660-661-662-663-664-665-666-667-668-669-670-671-672-673-674-675-676-677-678-679-680-681-682-683-684-685-686-687-688-689-690-691-692-693-694-695-696-697-698-699-700-701-702-703-704-705-706-707-708-709-710-711-712-713-714-715-716-717-718-719-720-721-722-723-724-725-726-727-728-729-730-731-732-733-734-735-736-737-738-739-740-741-742-743-744-745-746-747-748-749-750-751-752-753-754-755-756-757-758-759-760-761-762-763-764-765-766-767-768-769-770-771-772-773-774-775-776-777-778-779-780-781-782-783-784-785-786-787-788-789-790-791-792-793-794-795-796-797-798-799-800-801-802-803-804-805-806-807-808-809-810-811-812-813-814-815-816-817-818-819-820-821-822-823-824-825-826-827-828-829-830-831-832-833-834-835-836-837-838-839-840-841-842-843-844-845-846-847-848-849-850-851-852-853-854-855-856-857-858-859-860-861-862-863-864-865-866-867-868-869-870-871-872-873-874-875-876-877-878-879-880-881-882-883-884-885-886-887-888-889-890-891-892-893-894-895-896-897-898-899-900-901-902-903-904-905-906-907-908-909-910-911-912-913-914-915-916-917-918-919-920-921-922-923-924-925-926-927-928-929-930-931-932-933-934-935-936-937-938-939-940-941-942-943-944-945-946-947-948-949-950-951-952-953-954-955-956-957-958-959-960-961-962-963-964-965-966-967-968-969-970-971-972-973-974-975-976-977-978-979-980-981-982-983-984-985-986-987-988-989-990-991-992-993-994-995-996-997-998-999-1000

(KIRBY)



BUDE QUADRANGLE
MISSISSIPPI
TOPOGRAPHIC SERIES

(MC CALL
CREEK)

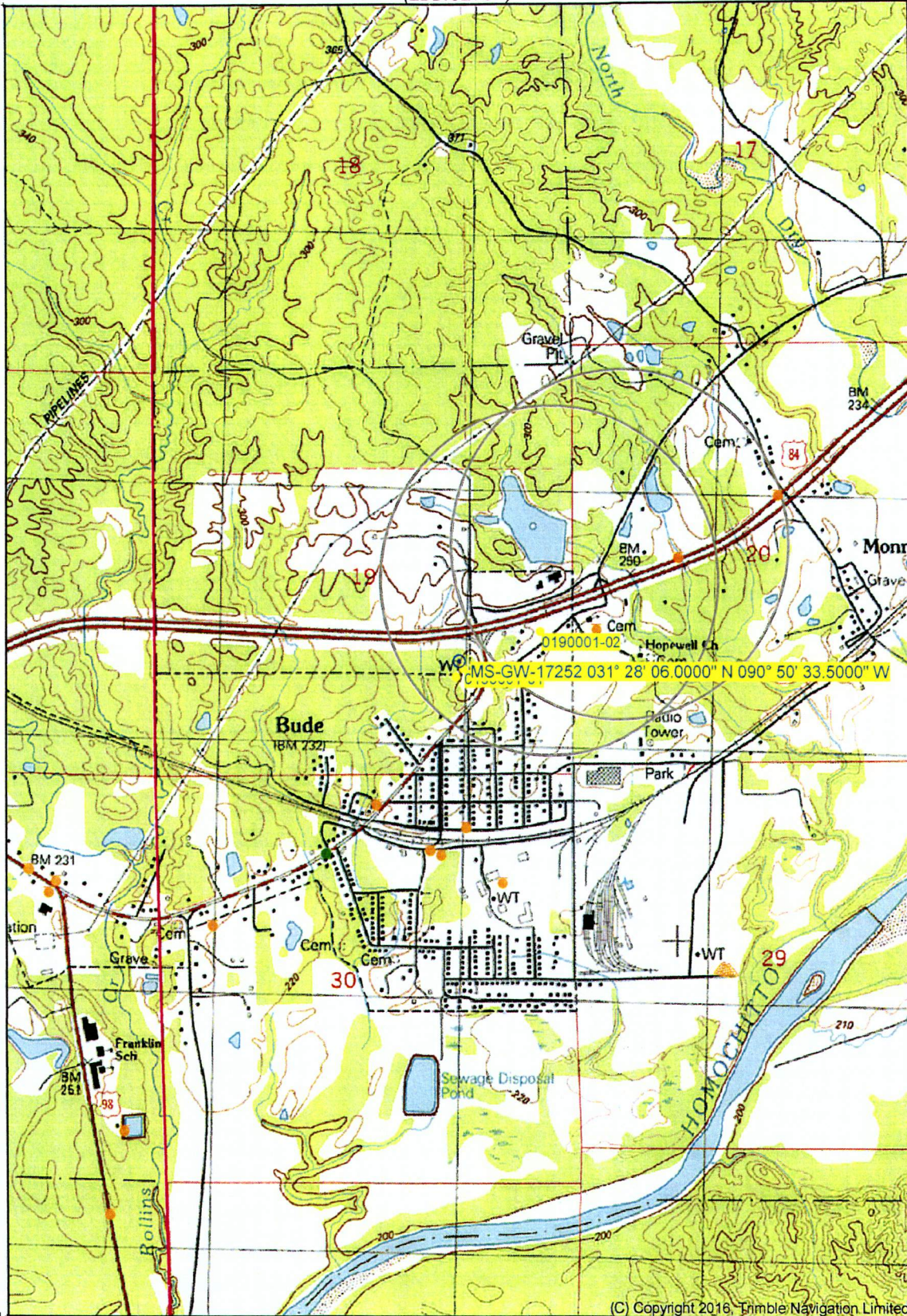
090° 51' 42.5898" W
031° 29' 29.5280" N

(EDDICETON)

090° 49' 23.8710" W
031° 29' 29.5280" N

(MEADVILLE)

(LITTLE SPRINGS)



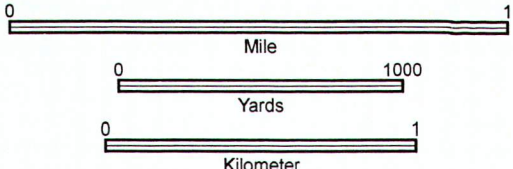
031° 26' 41.9254" N
090° 51' 42.5898" W

(HOMOCHITTO)

Declination



(BUSY CORNER)
SCALE 1:24000



CONTOUR INTERVAL 20 FT

(C) Copyright 2016, Trimble Navigation Limited
Printed: Wed Mar 08, 2017
090° 49' 23.8710" W
031° 26' 41.9254" N

(SMITHDALE)

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 19M N and
10M W

31090-D7-TM-024
BUDE, MS
JAN 1, 1988



GRINER DRILLING SERVICE Inc.

COLUMBIA, MS. (800) 221-4098
 MOBILE, ALA. (800) 592-9355
 RAYNE, LA. (888) 840-6747
 RICHLAND, MS. (801) 932-4511

CO TOWN OF BUDE
 WELL WELL #3
 FLD FRANKLIN COUNTY
 CTY BUDE
 STE MS.
 FILING No

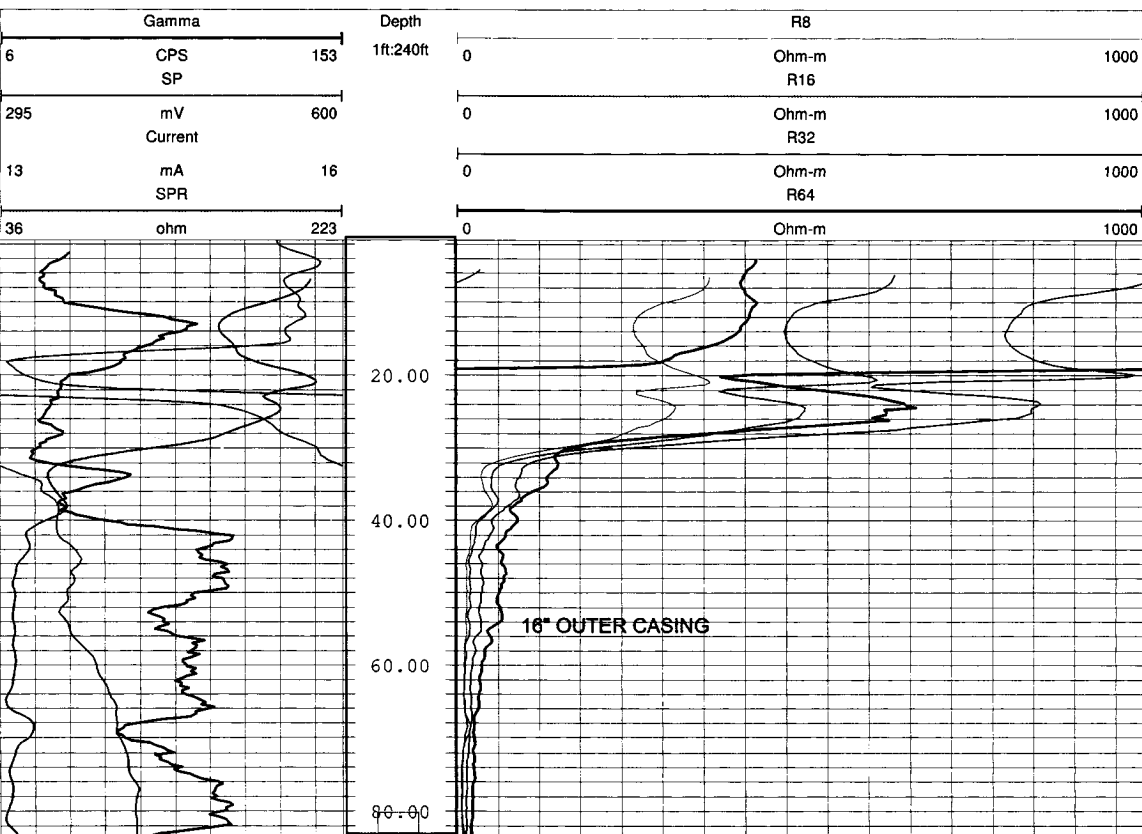
COMPANY TOWN OF BUDE	J0083	OTHER SERVICES
WELL ID WELL #3		
FIELD FRANKLIN COUNTY	MS-GW-17252	
COUNTY	STATE MS	

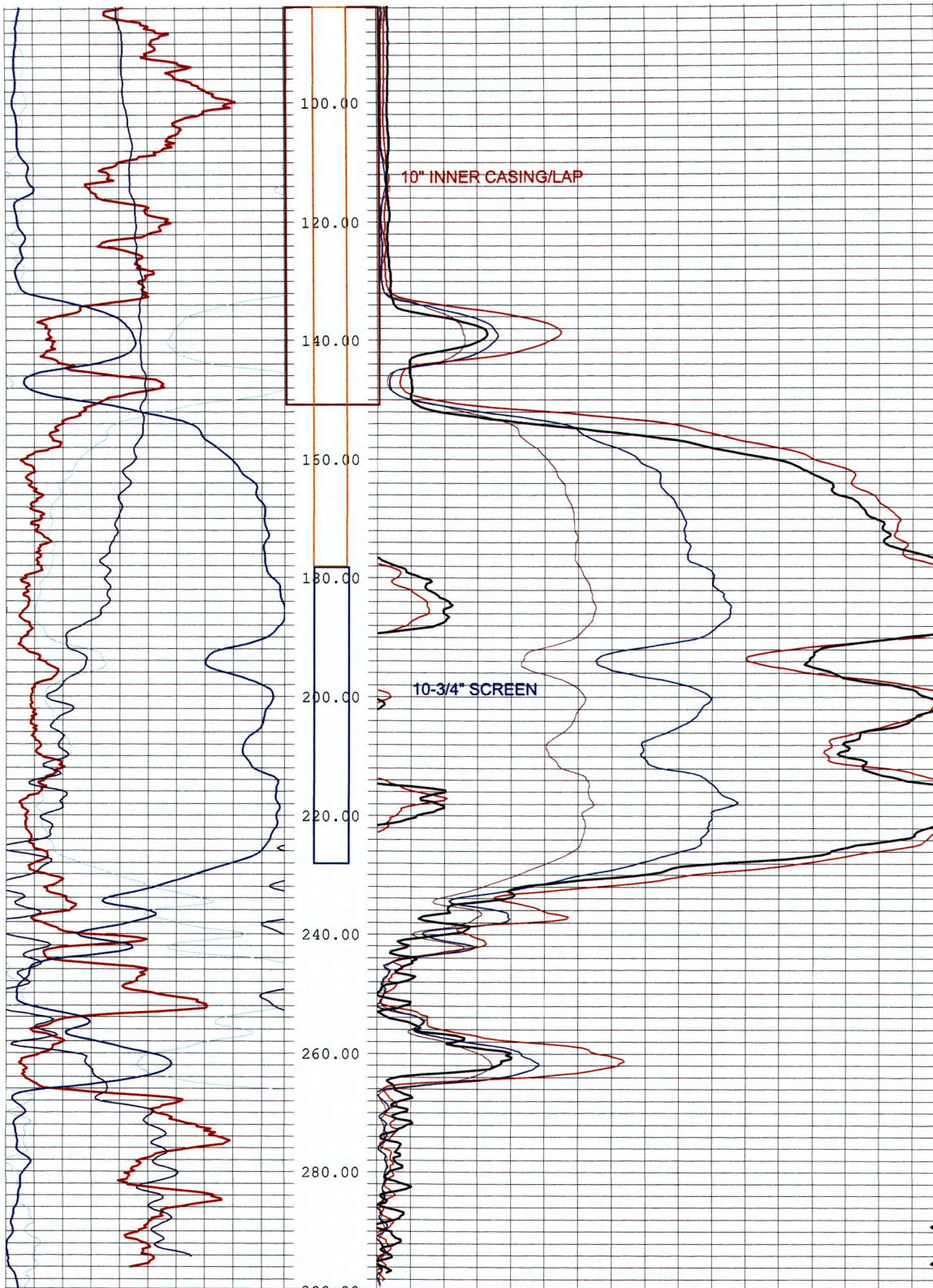
LOCATION
 NW SE S19 T6N R4E
 31.468333 90.842639

SEC TWP RGE
 ELEVATION 298
 ABOVE PERM. DATUM

PERMANENT DATUM	JULY 14, 2016	TYPE FLUID IN HOLE	GEL
LOG MEAS. FROM G/L	ONE	SALINITY	K.B.
DRILLING MEAS. FROM/G/L	ELOGGAMMA	DENSITY	D.F.
DATE		LEVEL	G.L.
TYPE LOG	300 FT.	MAX. REC. TEMP.	
DEPTH-DRILLER	300 FT.	LONGITUDE	
DEPTH-LOGGER	300 FT.	LATITUDE	
BTM LOGGED INTERVAL	7.50 FT.		
TOP LOGGED INTERVAL			
OPERATING RIG TIME	MIKE GRINER		
RECORDED BY	BUTCH BOURNE		
WITNESSED BY			

RUN NO.	BOREHOLE RECORD	CASING RECORD
BIT	FROM	TO
	SIZE	WGT.
	FROM	TO





SPR		
36	ohm	223
Current		
13	mA	16
SP		
295	mV	600
Gamma		
6	CPS	153

Depth		
1ft:240ft		
R64		
0	Ohm-m	1000
R32		
0	Ohm-m	1000
R16		
0	Ohm-m	1000
R8		
0	Ohm-m	1000