

County: Harrison  
 Permit #: 6116612  
 Driller: Griner Drilling Service, Inc.  
 Date drilling completed: 09/18/10

**State Well Report**  
**Part I - Driller's Log**  
 Mississippi Department of Environmental Quality  
 Office of Land and Water Resources  
 P.O. Box 2309  
 Jackson, MS 39225  
 (601)961- 5210  
 (601)961- 5228 (fax)

**For Office Use Only:**

Aquifer: \_\_\_\_\_  
 Well #: N 363  
 L. S. Elevation: \_\_\_\_\_  
 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.*

<p align="center"><b>Information on Well Owner</b>  <i>(Landowner if borehole is not for a water well)</i></p> <p>Owner Name: <u>Harrison County Utility Authority</u>        Mailing Address: <u>10271 Express Drive</u>  <u>Gulfport MS 39503</u>        City State Zip Code        Telephone No. ( ) _____</p>	<p align="center"><b>Well or Borehole Location</b></p> <p>Latitude: <u>30°23'20.10"N</u> Longitude: <u>89°16'23.49"W</u>        Method of Lat/Long (check one): Conventional Survey <input type="radio"/>        USGS quad <input type="radio"/> Hand-held GPS <input checked="" type="radio"/> Survey-grade GPS <input type="radio"/>  <u>1R</u> 1/4 <u>1R</u> 1/4 Sec <u>16</u> Twp <u>7S</u> Rng <u>13W</u>        Distance Direction Nearest Town  <u>7.5</u> Miles <u>NE</u> of <u>Long Beach</u>  <u>Vidalia Rd. Well</u></p>
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**Well / Borehole Data**

Date drilling started: 09/09/09 Date drilling completed: 09/18/10 Hole depth: 1000' Hole diameter: 21"

Location of the source of any surface water used for drilling: \_\_\_\_\_  
 Method of dosing and volume of Chlorine used in drilling and development: \_\_\_\_\_

Logs run (check all applicable): None  Electric  Gamma Ray  Density  Sonic  Neutron  Other: \_\_\_\_\_  
 Name of organization running log(s): Griner Drilling Service, Inc.

Purpose of borehole (check 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 (check one): Home  Industrial  Public Supply  Irrigation  Fish Culture  Other: \_\_\_\_\_

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

Static Water Level: 27.29 feet above  or below  land surface Date measured: 10/12/10

Method of Measurement (check one) steel tape  electric tape  air line  other: \_\_\_\_\_

Well depth: 800' Well grouted to a depth of 700' feet Type of grout (check one): Neat Cement  Bentonite  Mix

Casing length: 700 feet Casing diameter: 16 inches Type of casing: Steel

Screen length: 80 feet Screen diameter: 10 3/4 inches Type of screen: Munipak

Screen slot size: .020 inches Setting depth: From 710 feet to 790 feet

Type of completion (check all applicable): Gravel packed  Underreamed  Telescoped  Open hole   
 Natural Development  Other (describe): \_\_\_\_\_

Top of lap pipe or reduction in casing: \_\_\_\_\_ feet. *If telescoped or more than one screen, describe on next page*

N363

The sketch below only required for water wells

If well telescopes, show depths on sketch.

Ground Level →

see attached

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)
Gravel, Sand & Clay	Ground Level	140'
Clay	140'	190'
Sand	190'	215'
Clay	215'	230'
Sand	230'	250'
Clay	250'	480'
Sand	480'	800'
Clay	800'	1000'

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) a north arrow.

see attached

Landowner Name: \_\_\_\_\_

Form: OLWR-SWR-1A (04/08)

I 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.

Griner Drilling Service 0-581      11/18/10

*Charles H. Griner*  
Signature of Licensee

Print Name of Responsible Licensee and License No.      Date

**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  
(601)961-5210  
(601)961-5228 (fax)

County: Harrison  
Permit #: GW16612  
Driller: Griner Drilling Service, Inc.  
Date completed: 09/18/10  
Copy information from block on Part 1

**For Office Use Only:**  
Aquifer: \_\_\_\_\_  
Well #: N363  
Elevation: \_\_\_\_\_

*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>Harrison County Utility Authority</u>	Latitude: <u>30°23'20.10"N</u> Longitude: <u>89°16'23.49"W</u>
Mailing Address: <u>10271 Express Drive</u>	Method of Lat/Long (check one): Conventional Survey <input type="radio"/> <sup>C2.1</sup>
<u>Gulfport</u> <u>MS</u> <u>39503</u>	USGS quad <input type="radio"/> Hand-held GPS <input checked="" type="radio"/> Survey-grade GPS <input checked="" type="radio"/>
City State Zip Code	<u>1R</u> 1/4 <u>1R</u> 1/4 Sec <u>16</u> T <u>7S</u> R <u>13W</u>
Telephone No. (____) _____	Distance Direction Nearest Town <u>7.5</u> Miles <u>NE</u> of <u>Long Beach</u>

Pump Type	Power Type
Check one	Check one
Air Lift <input type="radio"/> Jet <input type="radio"/> Submersible <input type="radio"/>	Diesel Engine <input type="radio"/> Gasoline Engine <input type="radio"/> Natural Gas <input type="radio"/>
Bucket <input type="radio"/> Piston <input type="radio"/> Turbine <input checked="" type="radio"/>	Electric Motor <input checked="" type="radio"/> Hand <input type="radio"/> Tractor PTO <input type="radio"/>
Centrifugal <input type="radio"/> Rotary <input type="radio"/> Flowing Well <input type="radio"/>	Windmill <input type="radio"/> Other (specify): _____
Other (specify): <u>Line Shaft Turbine</u>	Horse Power Rating of Motor: <u>150</u>
Date Pump Installed: <u>05/14/10</u>	Setting Depth: <u>200'</u> feet
Rated Pump Capacity: <u>1500</u> Gallons Per Minute	Number of Stages: <u>4</u>

Pump Test Data	Method of Measuring Water Level
Date Well Tested: <u>10/12/10</u>	Check one
Static Water Level (A): <u>27.29</u> Feet Below Land Surface	Air Line <input type="radio"/> Electric Measuring Line <input checked="" type="radio"/> Steel Tape <input type="radio"/>
Pumping Water Level (B): <u>112.40</u> Feet Below Land Surface	Other (specify): _____
Drawdown [(B) - (A)]: <u>85.11</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Test Pumping Rate: <u>1515</u> Gallons Per Minute	Well yielded <u>1515</u> GPM with a drawdown of
Duration of Pump Test (minimum 4 hours): <u>8</u> hours	<u>85.11</u> feet after <u>8</u> hours of pumping

This is for (check one):    New Well     Replacement of Existing Pump     Repair of Existing Pump

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.  
Griner Drilling Service 0-581  
Print Name of Pump Installer and License No. (if applicable)      Charles H. Griner  
Signature of Pump Installer

Harrison County Utility Authority  
W 13 Vidalia Road Water Well  
2009

