

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

County: Hinds  
 Permit #: MS-6W-17600  
 Driller: Griner Drilling Serv.  
 Date drilling completed: 11-5-21

For Office Use Only:  
 Aquifer: \_\_\_\_\_  
 Well #: N160  
 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.*

Information on Well Owner <i>(Landowner if borehole is not for a water well)</i>	Well or Borehole Location
Owner Name: <u>MS Dept. of Agriculture + Commerce</u>	Latitude: <u>32°17'52.66"N</u> Longitude: <u>90°10'29.42"W</u>
Mailing Address: <u>P.O. Box 1609</u>	Method of Lat/Long (check one): Conventional Survey <input type="radio"/>
<u>Jackson MS 39215</u>	USGS quad <input type="radio"/> Hand-held GPS <input checked="" type="radio"/> Survey-grade GPS <input type="radio"/>
City State Zip Code	<u>SW 1/4 SN 1/4 Sec. 2 Twn 5N Rng 1E</u>
Telephone No. <u>(601) 359-1100</u>	Distance Direction Nearest Town
	<u>0</u> Miles of <u>Jackson, MS</u>

#### Well / Borehole Data

Date drilling started: 8/16/21 Date drilling completed: 11/5/21 Hole depth: 750' Hole diameter: 10"

Location of the source of any surface water used for drilling: City of Jackson  
 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

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: 295 feet above  or below  land surface Date measured: 11-9-21

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

Well depth: 730' Well grouted to a depth of 650 feet Type of grout (check one): Neat Cement  Bentonite  Mix

Casing length: 650 feet Casing diameter: 12 inches Type of casing: steel

Screen length: 75 feet Screen diameter: 8 inches Type of screen: Stainless Wire-Wrap

Screen slot size: .014 inches Setting depth: From 655 feet to 730 feet

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

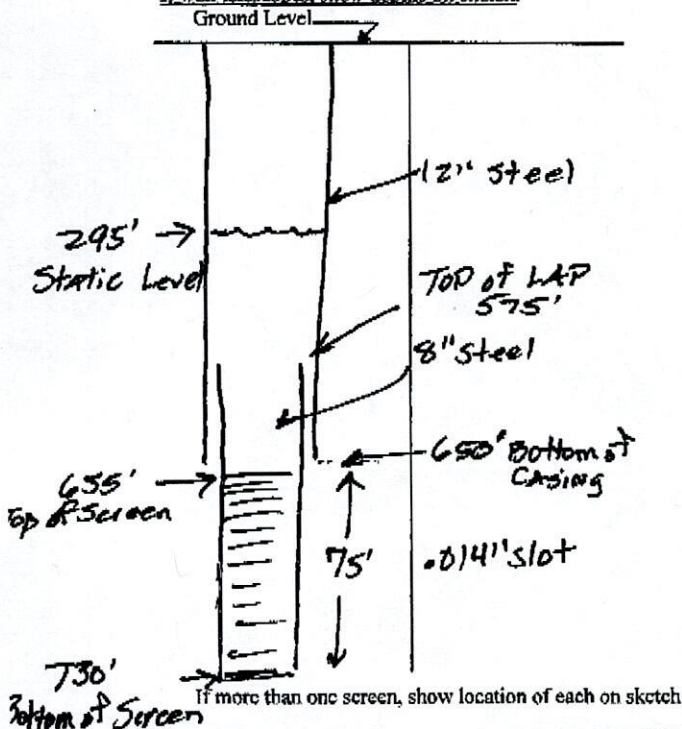
Top of lap pipe or reduction in casing: 575 feet. *If telescoped or more than one screen, describe on next page*

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

RECEIVED  
FEB 08 2022  
BY OLWR

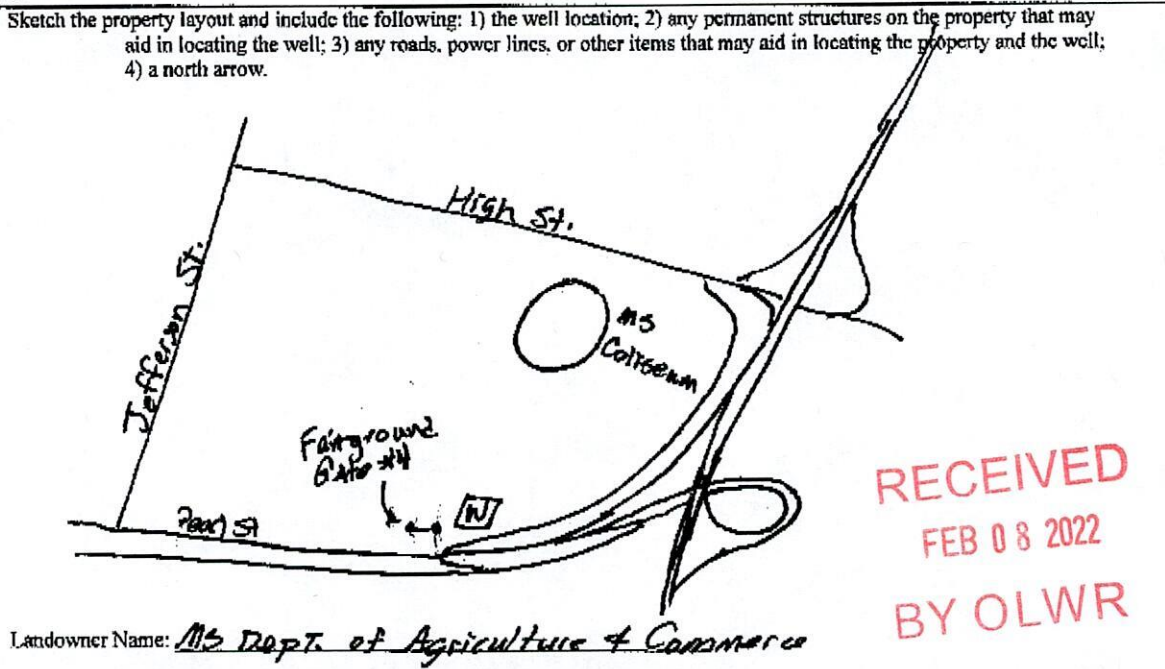
The sketch below only required for water wells

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)
TOP SOIL, LOAM SAND	Ground Level	40
SANDY CLAY w/ small gravel	40	85
GRAY SANDY CLAY	85	110
CLAY w/ streaks of shale	110	255
ROCK	255	258
CLAY	258	365
SANDY CLAY	365	400
SAND	400	455
CLAY	455	575
ROCKY	575	600
Fine sand n/ shale	600	655
SAND	655	720
Fine SAND	720	746
CLAY	746	750



RECEIVED  
FEB 08 2022  
BY OLWR

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.

Charles H. Griner Sr.      0-184      1-24-2022      Charles H. Griner

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

County: Hinds  
 Permit #: \_\_\_\_\_  
 Driller: Griner Drilling Serv.  
 Date completed: 1-24-22  
*Copy information from block on Part 1*

**For Office Use Only:**  
 Aquifer: \_\_\_\_\_  
 Well #: \_\_\_\_\_  
 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>MS Dept. Agriculture + Commerce</u>	Latitude: <u>32°17'52.46"N</u> Longitude: <u>90°10'29.42"W</u>
Mailing Address: <u>P.O. Box 1609</u>	Method of Lat/Long (check one): Conventional Survey <input type="radio"/>
<u>Jackson</u> <u>MS</u> <u>39215</u>	USGS quad <input type="radio"/> Hand-held GPS <input checked="" type="radio"/> Survey-grade GPS <input type="radio"/>
City State Zip Code	<u>2W 1/4 SW 1/4 Sec 2 T 5N R 1E</u>
Telephone No. <u>(601) 359-1100</u>	Distance <u>0</u> Miles Direction _____ of Nearest Town <u>Jackson, MS</u>

Pump Type	Power Type
Check one	Check one
Air Lift <input type="radio"/> Jct <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>OL LUBRICATED</u>	Horse Power Rating of Motor: <u>100 HP</u>
Date Pump Installed: <u>1-4-22</u>	Setting Depth: <u>420</u> feet
Rated Pump Capacity: <u>500</u> Gallons Per Minute	Number of Stages: <u>13</u>

Pump Test Data	Method of Measuring Water Level
Date Well Tested: <u>1-24-22</u>	Check one
Static Water Level (A): <u>296</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>336</u> Feet Below Land Surface	Other (specify): _____
Drawdown [(B) - (A)]: <u>40</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Test Pumping Rate: <u>550</u> Gallons Per Minute	Well yielded <u>513</u> GPM with a drawdown of _____
Duration of Pump Test (minimum 4 hours): <u>4</u> hours	<u>37.10</u> feet after <u>24</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.

Charles H. Griner Sr. 0-184  
 Print Name of Pump Installer and License No. (if applicable)

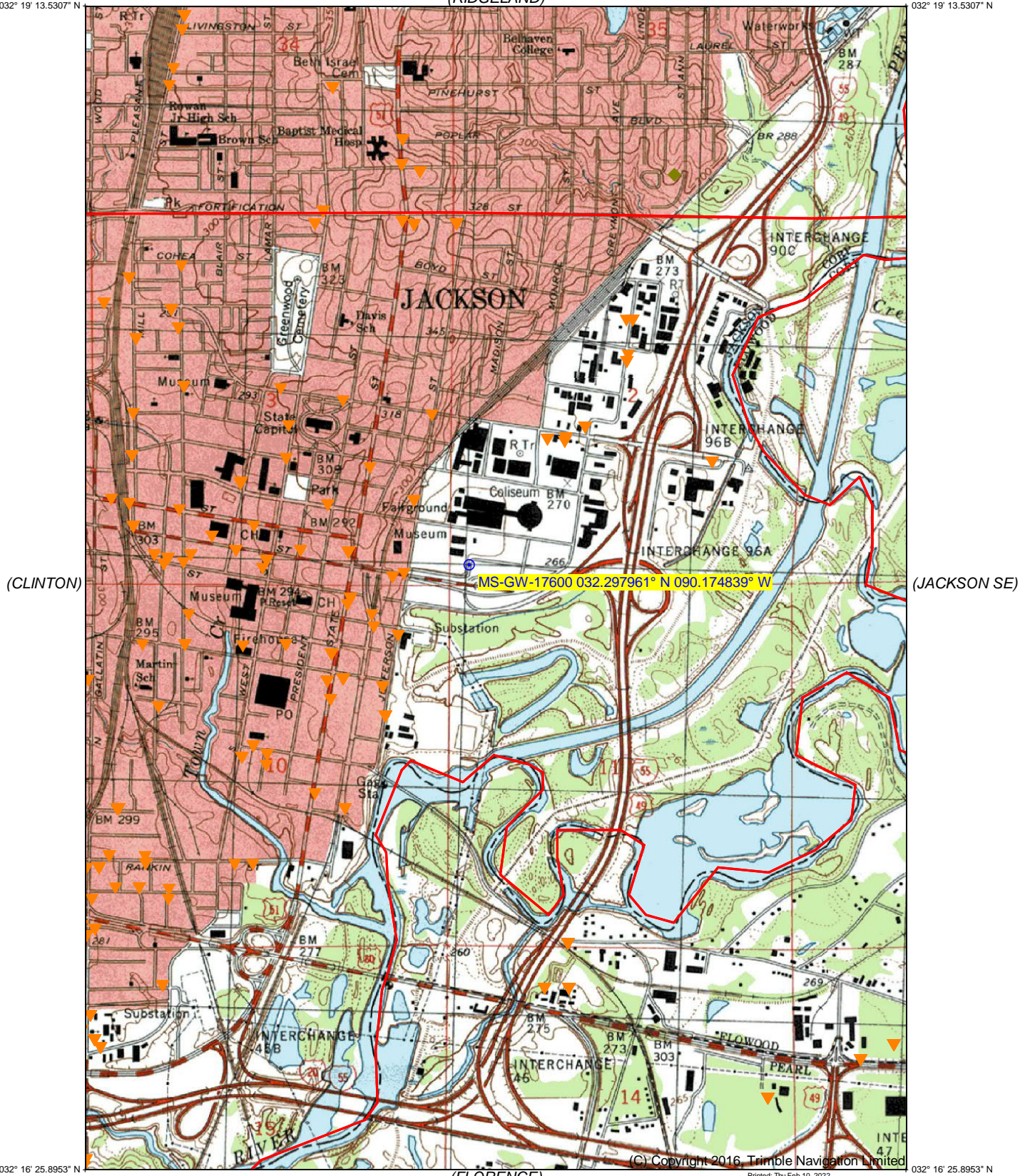
Charles H. Griner Sr.  
 Signature of Pump Installer

RECEIVED  
 FEB 08 2022  
 BY OLWR

090° 11' 34.9507" W  
032° 19' 13.5307" N

(RIDGELAND)

090° 09' 14.9390" W  
032° 19' 13.5307" N



032° 16' 25.8953" N  
090° 11' 34.9507" W

(FLORENCE)

032° 16' 25.8953" N  
090° 09' 14.9390" W

(NEW BYRAM)

(WHITFIELD)

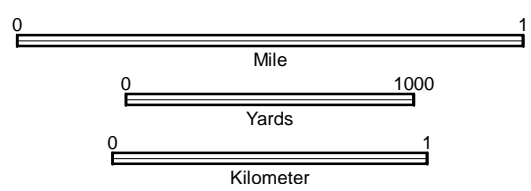
Produced by Trimble Terrain Navigator Pro  
Topography based on USGS 1:24,000  
Maps

North American 1983 Datum (NAD83)

To place on the predicted North American  
1927 move the projection lines 16M N and  
8M W



SCALE 1:24000



CONTOUR INTERVAL 10 FT

32090-C2-TM-024  
JACKSON, MS  
JAN 1, 1998

(C) Copyright 2016, Trimble Navigation Limited

Printed: Thu Feb 10, 2022