

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)

County: Jefferson Davis
 MS-GW-17378
 Permit #: _____
 Driller: Griner Drilling Service
 Date drilling completed: 08/02/18

For Office Use Only:

Well #: E0100
 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 <small>(Landowner if borehole is not for a water well)</small>	Well or Borehole Location
Owner Name: <u>Town of Prentiss</u>	Latitude: <u>31°36'35.69"N</u> Longitude: <u>89°52'6.87"W</u>
Mailing Address: <u>PO Box 1134</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
<u>Prentiss</u> MS 39474	<u>NE</u> ¼ <u>NW</u> ¼, Sec <u>1</u> T <u>7N</u> R <u>19W</u>
City State Zip Code	<u>1/2</u> Miles <u>N</u> of _____
Telephone No. (____) _____	(Distance) (Direction) (Nearest Town)

Well / Borehole Data

Date drilling started: 01/2018 Date drilling completed: 07/2018 Hole depth: 318 Hole diameter: 23.5

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): log run 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 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: 88.85' feet above or below land surface Date measured: _____
(check one)

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

Well depth: 248' Well grouted to a depth of: 180 feet Type of grout (check one) Neat Cement Bentonite Mix

Casing length: 180 feet Casing diameter: 18 inches Type of casing: Steel

Screen length: 60 feet Screen diameter: 12 inches Type of screen: Steel

Screen slot size: .016 inches Setting depth: From 188 feet to 248 feet

Type of completion (check all applicable) gravel packed Underreamed Open hole Natural Development

Other (describe): _____

Top of lap pipe or reduction in casing: 118 feet

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



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: <u>Jefferson Davis</u>
Permit #: <u>MS-GW-17378</u>
Driller: <u>Griner Drilling Service, Inc.</u>
Date completed: <u>08-02-18</u>
<u>Copy information from block on Part 1</u>

For Office Use Only:
Well #: <u>E0100</u>
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>Town of Prentiss</u>	Latitude: <u>31°36'35.69"N</u> Longitude: <u>89°52'6.87"W</u>
Mailing Address: <u>PO Box 1134</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS ^X _____, Survey-grade GPS _____
<u>Prentiss</u> <u>MS</u>	<u>NE</u> ¼ <u>NW</u> ¼, Sec <u>1</u> T <u>7N</u> R <u>19W</u>
City State Zip Code	<u>1/2</u> Miles <u>N</u> of <u>Prentiss</u>
Telephone No. (____) _____	(Distance) (Direction) (Nearest Town)

Pump Type (check one)
Submersible <input type="checkbox"/> Turbine <input checked="" type="checkbox"/> Air Lift <input type="checkbox"/> Centrifugal <input type="checkbox"/> Flowing Well <input type="checkbox"/> Jet <input type="checkbox"/> Piston <input type="checkbox"/> Rotary <input type="checkbox"/> Other (describe): _____
Date Pump Installed: <u>05/22/18</u> Rated Pump Capacity: <u>880</u> Gallons Per Minute
Is This Pump (check one): <input checked="" type="checkbox"/> New <input type="checkbox"/> Repaired <input type="checkbox"/> Replacement

Power Type (check one)
Electric <input checked="" type="checkbox"/> Diesel <input type="checkbox"/> Gasoline <input type="checkbox"/> Natural Gas <input type="checkbox"/> Tractor PTO <input type="checkbox"/> Windmill <input type="checkbox"/> Other (describe): _____
Horse Power Rating of Motor: <u>40</u> Setting Depth: _____ feet Number of Stages: <u>2</u>

Pump Test Data for Non Flowing Well
Date Well Tested: <u>01/13/18</u> Duration of Pump Test (minimum 4 hours): <u>24</u> hours
Static Water Level (A): <u>85.85</u> Feet Below Land Surface Pumping Water Level (B): <u>96.71</u> Feet Below Land Surface
Drawdown [(B) - (A)]: <u>10.86</u> Feet Below Land Surface Test Pumping Rate: <u>800</u> Gallons Per Minute
Method of measurement (check one): Steel tape <input checked="" type="checkbox"/> Electric tape <input type="checkbox"/> Air line <input type="checkbox"/> 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>McCrometer</u> Meter Serial Number: _____
Meter Model Number/Name: <u>McCrometer ML04</u> Type of Meter: <u>Electronic Propeller</u>
Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): <u>.0001 to 10000</u>
Installation Date: <u>04/2018</u> Meter installed by: <u>TL Wallace Construction</u>
Is This Meter (check one): <input checked="" type="checkbox"/> New <input type="checkbox"/> Repaired <input type="checkbox"/> 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.		
<u>Charles H. Griner</u>	<u>0-184</u>	<u>08-08-18</u>
Print Name of Pump Installer and License No. (if applicable)	Date	Signature of Pump Installer

Untitled Map

Write a description for your map.

Legend

-  Feature 1
-  MS
-  Prentiss Well'

Prentiss Well'

Google Earth

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RECEIVED
20 AUG 2018
By OLWR



200 ft

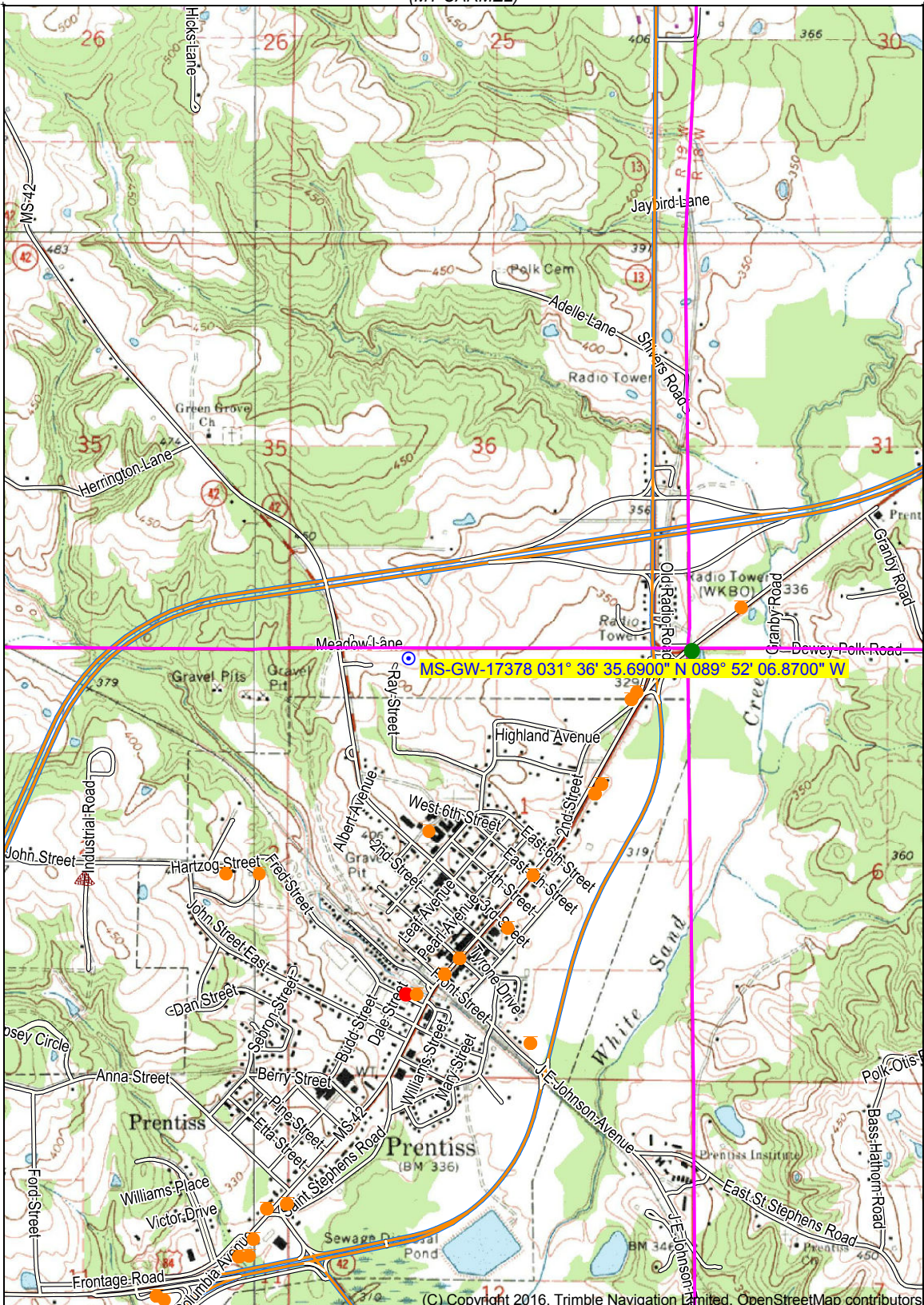
089° 53' 07.7715" W
031° 37' 59.4408" N

(MT CARMEL)

089° 50' 48.8421" W
031° 37' 59.4408" N

(PRENTISS WEST)

(LAKE MIKE
CONNOR)



031° 35' 11.8383" N
089° 53' 07.7715" W

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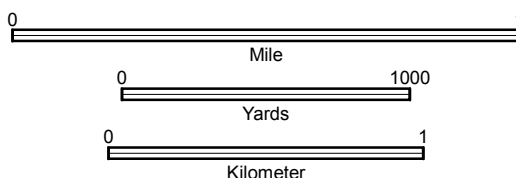
Printed: Mon Aug 27, 2018 089° 50' 48.8421" W
031° 35' 11.8383" N

(OAK VALE)

Declination



(BUNKER HILL)
SCALE 1:24000



(BASSFIELD)

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
7M W

31089-E7-TM-024
PRENTISS EAST, MS
JAN 1, 1970

CONTOUR INTERVAL 10 FT