

County: Jones

Permit #: MS-6N-16533

Driller: Griner Drilling Service

Date drilling completed: 7/23/2010

Well Driller Report and Well Log

Mississippi Department of Environmental Quality
 Office of Land and Water Resources
 P.O. Box 10631
 Jackson, MS 39289-0631
 (601) 961-5210
 (601) 354-6938 (fax)

For Office Use Only:

Aquifer: _____

Well #: F105

L.S. Elevation: _____

E-Log #: _____

State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.

Well Owner Information			Well Location		
Owner Name	<u>Pleasant Ridge Water Association</u>		Latitude: <u>31 38' 50.03" n</u>	Longitude: <u>89 13' 45.6" W</u>	
Mailing Address:	<u>24 Holly Road</u>		Method of Lat/Long (circle one): <u>Conventional Survey</u>		
			XXX <u>USGS quad, Hand-held GPS, Survey-grade GPS</u>		
<u>Laurel</u>	<u>Mississippi</u>	<u>39443</u>	<u>SW</u> 1/4	<u>NW</u> 1/4 Sec <u>20</u> <u>8N</u>	<u>12W</u>
City	State	Zip Code		<u>10</u> Twn <u>5N</u>	<u>14W</u>
Telephone No.	<u>(601) 763-8515</u>		Distance	Direction	Nearest Town
			<u>8</u> Miles	<u>north</u> of	<u>Ellisville</u>

Well Data

Purpose of Well (circle one) Home Industrial (Public Supply) Irrigation Fish Culture Other: _____

Date well drilling started: 11/3/2009 Date well drilling completed: 12-02-09

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

Static Water Level: 272 feet above or (below) (circle one) land surface Date measured: 7-15-10

Method of Measurement (circle one) steel tape (electric tape) air line other: _____

Hole depth: 620' Well depth: 604' Well grouted to a depth of 550' feet

Type of grout (circle one): Cement Bentonite (Mix)

Casing length: 550' feet Casing diameter: 12.75 inches Type of casing: Steel

Screen length: 60 feet Screen diameter: 8.625 inches Type of screen: Rod Base

Screen slot size: 0.02 inches Setting depth: From 544' feet to 604' feet

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

Other (describe): _____

Top of lap pipe or reduction in casing: 486 feet. If telescoped or more than one screen, describe on back of page

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.

I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

Griner Drilling Service, Inc. 0-581
 Print Name of Water Well Contractor and License No.

Charles H. Griner
 Signature of Water Well Contractor

RECEIVED
 BY: OIWR

If well telescopes please sketch below and show depths

STATE WELL REPORT

Part 2

Pump Installer's Completion Report

County: _____
Permit # : _____
Driller: <u>Griner Drilling Service</u>
Date Completed: <u>7/23/2010</u>

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 10631
Jackson, MS 39289-0631
(601)961-5210
(601)354-6938 (fax)

For Office Use Only:	
Aquifer: _____	Well # : <u>F105</u>
Elevation: _____	

This report must be prepared by the pump installer in detail and filed with the Department with 30 days of the installation of pump. A copy of Part 1 of this report must be attached to the report.

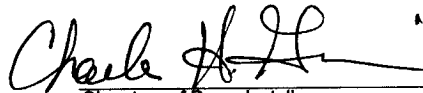
Well Owner Information	Well Location						
Owner Name <u>Pleasant Ridge Water Association</u>	Latitude: <u>31 38'50.03n</u> Longitude: <u>89 13'45.61w</u>						
Mailing Address: <u>24 Holly Road</u>	Method of Lat/Long (circle one): <u>Conventional Survey,</u>						
<table style="width: 100%; border: none;"> <tr> <td style="border: none;"><u>Laurel</u></td> <td style="border: none;"><u>Mississippi</u></td> <td style="border: none;"><u>39443</u></td> </tr> <tr> <td style="border: none; font-size: small;">City</td> <td style="border: none; font-size: small;">State</td> <td style="border: none; font-size: small;">Zip Code</td> </tr> </table>	<u>Laurel</u>	<u>Mississippi</u>	<u>39443</u>	City	State	Zip Code	USGS quad, Hand-held GPS, Survey-grade GPS <u>SW 1/4 NW 1/4 Sec 20 8N 12W</u> <u>18 Twn 5N Rng 14W</u>
<u>Laurel</u>	<u>Mississippi</u>	<u>39443</u>					
City	State	Zip Code					
Telephone No. <u>-601 763-8515</u>	Distance <u>8 Miles</u> Direction <u>North</u> Nearest Town <u>of Ellisville</u>						

Pump Type Circle one	Power Type Circle one
Air Lift <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Bucket <input type="checkbox"/> Piton <input type="checkbox"/> (Turbine) <input type="checkbox"/> Centrifugal <input type="checkbox"/> Rotary <input type="checkbox"/> Flowing Well <input type="checkbox"/> Other (specify): _____	Diesel Engine <input type="checkbox"/> Gasoline Engine <input type="checkbox"/> Natural Gas <input type="checkbox"/> (Electric Motor) <input type="checkbox"/> Hand <input type="checkbox"/> Tractor PTO <input type="checkbox"/> Windmill <input type="checkbox"/> Other (specify): _____ Horse Power Rating of Motor: _____ Setting Depth: _____ feet Number of Stages: _____
Date Pump Installed: <u>7/13/2010</u>	
Rated Pump Capacity: <u>400</u> Gallons per minute	

Pump Test Data	Method of Measuring Water Level Circle One
Date Well Tested: <u>12/9/2009</u>	Air Line <input type="checkbox"/> (Electric Measuring Line) <input type="checkbox"/> Steel Tape <input type="checkbox"/>
Static Water Level (A): <u>276'</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>377.6</u> Feet Below Land Surface	For flowing well, measured shut in head : _____ feet
Drawdown {(B) - (A)} : <u>101.6</u> Feet Below Land Surface	Well yielded <u>402</u> GPM with a drawdown of
Test Pumping Rate: <u>402</u> Gallons Per Minute	<u>101.6</u> feet after <u>24</u> hours of pumping
Duration of Pump test (minimum 4 hours) : <u>24</u> hours	

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

Griner Drilling Service, Inc. 0-581
Print Name of Pump Installer and License No. (if applicable)


Signature of Pump Installer

RECEIVED
OCT 01 2010
BY: OIWR