

# State Well Report

Part 1

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 #: C-19  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: Lincoln  
Permit #: \_\_\_\_\_  
Driller: GRENN WATER WELL & SUPPLY, INC.  
Date drilling completed: 2/8/06

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>Patricia Nicholas</u>	Latitude: <u>31.39.453</u> Longitude: <u>90.32.404</u>
Mailing Address: <u>2909 McCurley Ln NW</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>
<u>Wesson MS 39191</u>	USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS
City State Zip Code	<u>NW 1/4 NE 1/4</u> Sec <u>19</u> Twn <u>8N</u> Rng <u>7E</u>
Telephone No. <u>(601) 823-6457</u>	SE SW Direction <u>NE</u> Nearest Town <u>Lloyd Star</u>
	Distance <u>2</u> Miles of

Well Data

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

Date well drilling started: 2/8/06 Date well drilling completed: 2/8/06

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

Static Water Level: 69 feet above or below (circle one) land surface Date measured: 2/8/06

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

Hole depth: 95 Well depth: 89 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 69 feet Casing diameter: 4 inches Type of casing: PVC

Screen length: 20 feet Screen diameter: 4 inches Type of screen: PVC

Screen slot size: .010 inches Setting depth: From 69 feet to 89 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: \_\_\_\_\_ 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): \_\_\_\_\_

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.

GRENN WATER WELL & SUPPLY, INC.  
Brian McClendon, lic. no. 0-664

Print Name of Water Well Contractor and License No.

Brian McClendon  
Signature of Water Well Contractor

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If well telescopes please sketch below and show depths.

C-

Ground Level

Description of Formations Encountered	From	To
red clay	0	15
sand & gravel	15	40
white clay	40	64
sand & gravel	64	89
white clay	89	95

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) indicate direction.

The sketch shows a rectangular property boundary. On the left side, a road curves inward and is labeled "dead end road". At the top of the property, there is a square labeled "house" and an 'x' labeled "well". A horizontal line labeled "drive" runs from the house towards the right side of the property.

Landowner Name: Patricia Nicholas

Brian McClendon, lic. no. 0-664  
GRENN WATER WELL & SUPPLY, INC.

Brian McClendon  
Signature of Water Well Contractor

# STATE WELL REPORT

## Part 2

**Pump Installer's Completion Report**  
 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 #: C-79

Elevation: \_\_\_\_\_

County: Lincoln  
 Permit #: \_\_\_\_\_  
 Driller: GRENN WATER WELL & SUPPLY, INC.  
 Date completed: 2/18/06

**This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump.**

Well Owner Information	Well Location
Owner Name: <u>Patricia Nicholas</u> Mailing Address: <u>2909 McCurley Ln NW</u> <u>Wesson MS 39191</u> <small>City State Zip Code</small> Telephone No. <u>(601) 823-6457</u>	Latitude: <u>31° 39' 45.3"</u> Longitude: <u>90° 32' 40.4"</u> <small>27 24</small> Method of Lat/Long (circle one): <u>Conventional Survey</u> , USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS <u>NW 1/4 NE 1/4 Sec 19 Twn 8N Rng 7E</u> Distance Direction Nearest Town <u>2 Miles NE of Loyd Star</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet <input checked="" type="radio"/> <u>Submersible</u> Bucket Piston Turbine Centrifugal Rotary Flowing Well Other (specify): _____ Date Pump Installed: <u>2/18/06</u> Rated Pump Capacity: <u>10</u> Gallons Per Minute	Diesel Engine Gasoline Engine Natural Gas <input checked="" type="radio"/> <u>Electric Motor</u> Hand Tractor PTO Windmill Other (specify): _____ Horse Power Rating of Motor: <u>1/2</u> Setting Depth: <u>88</u> feet Number of Stages: <u>9</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>2/18/06</u> Static Water Level (A): <u>69</u> Feet Below Land Surface Pumping Water Level (B): <u>85</u> Feet Below Land Surface Drawdown [(B) - (A)]: <u>16</u> Feet Below Land Surface Test Pumping Rate: <u>10</u> Gallons Per Minute Duration of Pump Test (minimum 4 hours): <u>4</u> hours	Air Line <input checked="" type="radio"/> <u>Electric Measuring Line</u> Steel Tape Other (specify): _____ For flowing well, measured shut in head: _____ feet Well yielded <u>10</u> GPM with a drawdown of <u>16</u> feet after <u>4</u> hours of pumping

**I HEREBY CERTIFY** that the above statements are true to the best of my knowledge.  
 GRENN WATER WELL & SUPPLY, INC.  
 William Hardin, lic. no. 0-717P  
 Print Name of Pump Installer and License No. (if applicable)

William Hardin  
 Signature of Pump Installer

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 FEB 24 2006  
 BY OLWR