

# 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 #: F-74  
L. S. Elevation: \_\_\_\_\_  
B-log #: \_\_\_\_\_

County: Lincoln  
Permit #: \_\_\_\_\_  
Driller: GRENN WATER WELL & SUPPLY, INC  
Date drilling completed: 3/31/08

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>Scott Duckworth</u>         | Latitude: <u>31° 35' 77"</u> Longitude: <u>90° 31' 738"</u>                    |
| Mailing Address: <u>1699 Fairman Ln NW</u> | Method of Lat/Long (circle one): <u>Conventional Survey</u>                    |
| <u>Brookhaven MS 39601</u>                 | USGS quad, <u>Hand-held GPS</u> Survey-grade GPS                               |
| City State Zip Code                        | <u>SE 1/4 NW 8</u> Sec <u>8</u> Twn <u>7N</u> Rng <u>6E</u>                    |
| Telephone No. <u>(504) 329-6624</u>        | NE Distance <u>4</u> Miles Direction <u>SW</u> of Nearest Town <u>Hyd Star</u> |

Well Data

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

Date well drilling started: 3/31/08 Date well drilling completed: 3/31/08

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

Static Water Level: 116 feet above or below (circle one) land surface Date measured: 3/31/08

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

Hole depth: 278 Well depth: 272 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement  Bentonite  Mix

Casing length: 262 feet Casing diameter: 4 inches Type of casing: PK

Screen length: 10 feet Screen diameter: 4 inches Type of screen: PK

Screen slot size: 1010 inches Setting depth: From 262 feet to 272 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. \_\_\_\_\_ Signature of Water Well Contractor: Brian McClendon

RECEIVED  
APR 10 2008  
BY: OLWR

If well telescopes please sketch below and show depths.

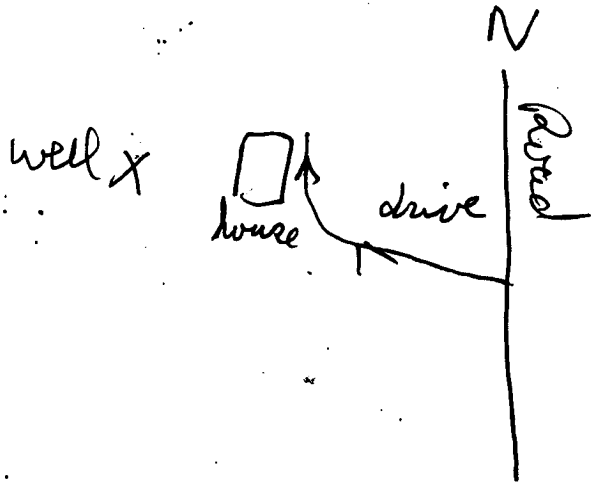
F-74

Ground Level

| Description of Formations Encountered | From | To  |
|---------------------------------------|------|-----|
| gravel mix                            | 0    | 34  |
| white clay                            | 34   | 63  |
| sand                                  | 63   | 72  |
| white clay                            | 72   | 77  |
| blue clay                             | 77   | 110 |
| mixed clay                            | 110  | 146 |
| streaky                               | 146  | 175 |
| sand                                  | 175  | 278 |
|                                       |      |     |
|                                       |      |     |
|                                       |      |     |
|                                       |      |     |
|                                       |      |     |
|                                       |      |     |
|                                       |      |     |
|                                       |      |     |
|                                       |      |     |
|                                       |      |     |

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.



Landowner Name: Govt Duckworth

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 #: F-74

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

County: Lincoln  
Permit #: \_\_\_\_\_  
Driller: GRENN WATER WELL & SUPPLY, INC.  
Date completed: 3/31/08

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>Scott Duckworth</u>         | Latitude: <u>31° 35' 778"</u> Longitude: <u>90° 37' 738"</u> |
| Mailing Address: <u>1699 Fairman Ln NW</u> | Method of Lat/Long (circle one): Conventional Survey,        |
| <u>Brookhaven MS 39601</u>                 | USGS quad, <u>(Hand-held GPS)</u> Survey-grade GPS           |
| City State Zip Code                        | <u>SE 1/4 NW 1/4 Sec 8 Twn 7N Rng 6E</u>                     |
| Telephone No. <u>(564) 329-6624</u>        | Distance Direction Nearest Town                              |
|  | <u>4 Miles SW of Lloyd Star</u>                              |

| Pump Type<br>Circle one  | Power Type<br>Circle one  |
|--|---|
| Air Lift Jet <input checked="" type="radio"/> <u>Submersible</u> | Diesel Engine Gasoline Engine Natural Gas                               |
| Bucket Piston Turbine  | <input checked="" type="radio"/> <u>Electric Motor</u> Hand Tractor PTO |
| Centrifugal Rotary Flowing Well                                  | Windmill Other (specify): _____   |
| Other (specify): _____   | Horse Power Rating of Motor: <u>1</u>                                   |
| Date Pump Installed: <u>3/31/08</u>                              | Setting Depth: <u>116</u> feet  |
| Rated Pump Capacity: <u>10</u> Gallons Per Minute                | Number of Stages: <u>15</u>   |

| Pump Test Data  | Method of Measuring Water Level<br>Circle one                                       |
|---|---|
| Date Well Tested: <u>3/31/08</u>                            | Air Line <input checked="" type="radio"/> <u>Electric Measuring Line</u> Steel Tape |
| Static Water Level (A): <u>116</u> Feet Below Land Surface  | Other (specify): _____  |
| Pumping Water Level (B): <u>125</u> Feet Below Land Surface | For flowing well, measured shut in head: _____ feet                                 |
| Drawdown [(B) - (A)]: <u>9</u> Feet Below Land Surface      | Well yielded <u>13</u> GPM with a drawdown of                                       |
| Test Pumping Rate: <u>13</u> Gallons Per Minute             | <u>9</u> feet after <u>4</u> hours of pumping                                       |
| Duration of Pump Test (minimum 4 hours): <u>4</u> hours     |   |

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

RECEIVED

APR 10 2008

BY: OLWR