County: Lacton Permint #.		State Well Report					
Permit #:	comment incolo	Part 1	For Office Use Only:				
Drifter: GRENN WATCE WELL 6 Drifter: GO1961-5210 Date drifting completion of drifting of the well. Jackson, MS 39289-0631 State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drifting of the well. Well Owner Isformation Owner Name: Jong A Doc /6 But of drifting of the well. Well Owner Isformation Owner Name: Jong A Doc /6 But of the doc of Law Cong (circle one): Congrue Age / 37. (57.) But of the doc of Law Cong (circle one): Congrue Age / 37. (57.) But of the doc of Law Cong (circle one): Congrue Age / 37. (57.) But of the doc of Law Cong (circle one): Congrue Age / 37. (57.) But of the doc of Law Cong (circle one): Congrue Age / 37. (57.) But of the doc of Law Cong (circle one): Congrue Age / 37. (57.) But of the doc of Law Congrue Age / 37. (57.) Mello dof Law Cong (circle one): Purpose of Well (circle one): Mello dof Law Cong (circle one): Congrue Age / 37. (57.) But of How regulation: Value / 40.) Direction Nearest Toym Mello dof Law Cong (circle one): But oeat do do flow regulation: Value / 40.)<	Mis						
Drifter: Suppry: N.C. 1/30/04 Jackson, MS 39289-0631 (601)354-6938 (fax) L.S. Elevation: Jack anting completed: E/30/04 Get 1/601/645-210 (601)354-6938 (fax) L.S. Elevation: 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 Acation Well Ower Information Using Madress: [63] Jackson, MS 39289-0631 (601)354-6938 (fax) Well Ower Name Tog Mouth Well Ower Information Well Acation Well Ower Name Tog Mouth Jackson, MS 39289-0631 (Ming Address: [63] Jackson, MS 39289-0631 (G01)354-6938 (fax) Well Ower Name Tog Mouth Matter State Jackson, MS 39289-0631 (Ming Address: Well Data Matter State Jackson, MS 39289-0631 (G01) Lis Hevation: Well Data Purpose of Well (circle on flame) Industrial Public Supply Ingene Toyn, Magnesi To			Well #: <u>F78</u>				
Date diffing complete: 12 / 12 / 10 / 10 / 10 / 10 / 10 / 10 /	Umiler:		L. S. Elevation:				
(601)334.6938 (tax) Exage #	Date drilling completed: 6/30/09	(601)961-5210					
36 days of completion of drilling of the well. Well Over Information Owner Name		(601)354-6938 (fax)	E-log #:				
Well Owner Information Owner Name Owner Name Industry Builing Address: Id.31 J. J. J. Market Builing Address: Id.31 Builing Address: Id.32 Builing Address: Id.31 Builing Address: Id.32 Builing Address: Builing Address: Builing Address: Builing Address:	State Law requires that this report b	be prepared by the driller in detail and fil-	ed with the Department within				
Mailing Address: [43] Jamman 1 Distance Association Distance Association Distance Association Method of Lat/Long (circle one) Sate State Zip Code Well Data Method of Cluture Purpose of Well (circle one) Industrial Purpose of Well (circle one) Surpose Static Water Level: 64 Grey for the well well well well is the well well well is the well well is the well well well is the well well well is the well well well well well well is the well well well well well well well we			Well Location				
Image: State Image: State <td< td=""><td></td><td></td><td colspan="3">Latitude: 31 • 35' 705 Longitude: 90 • 37 '681"</td></td<>			Latitude: 31 • 35' 705 Longitude: 90 • 37 '681"				
City State Zip Code Telephone No. (b) 835-90.23 Well Data Purpose of Well (circle on Lione) Industrial Public Supply Irrigation Fish Culture Other: Date well drilling started: 6/30/01 Date well drilling completed: 6/30/01 Date well drilling started: 6/30/01 Date well drilling completed: 6/30/01 Static Water Level: 64 feet above or below (circle one) land surface Date measured: 6/30/01 Method of Measurement (circle one) steel tape feet tape air line other: Hole depth: Well depth: Mix Casing length: Method of flow regulation: Valve Mix Casing length: Method of flow regulation: Valve Mix Casing length: Method of flow regulation: Valve Mix Casing length: Method of flow regulation: Mix Casing length: Method effect Mix Top of lap pipe or reduction in casing:	Mailing Address: 1631 Fairme						
City State Zip Code Telephone No. (b) 835-90.23 Well Data Purpose of Well (circle on Lione) Industrial Public Supply Irrigation Fish Culture Other: Date well drilling started: 6/30/01 Date well drilling completed: 6/30/01 Date well drilling started: 6/30/01 Date well drilling completed: 6/30/01 Static Water Level: 64 feet above or below (circle one) land surface Date measured: 6/30/01 Method of Measurement (circle one) steel tape feet tape air line other: Hole depth: Well depth: Mix Casing length: Method of flow regulation: Valve Mix Casing length: Method of flow regulation: Valve Mix Casing length: Method of flow regulation: Valve Mix Casing length: Method of flow regulation: Mix Casing length: Method effect Mix Top of lap pipe or reduction in casing:		USGS quad, Hand	-held GPS, Survey-grade GPS				
Telephone No. (bol). 835-90.23 Difference of Breene of Breen	Enokhaven MS	Zin Code NE 1/ N/W Sec_	$\underline{\mathcal{E}} \vee \text{Twn} \underline{\mathcal{I}} \vee \text{Rng} \underline{\mathcal{E}} \underline{\mathcal{E}}$				
Well Data Purpose of Well (circle on f. Hame) Industrial Public Supply Irrigation Fish Culture Other:		ion Nearest Town of Burgeraven					
Purpose of Well (circle on Etome) Industrial Public Supply Irrigation Fish Culture Other:							
Date well drilling started: 6/30/01 Date well drilling completed: 6/30/01 If flowing, method of flow regulation: Valve Other (describe)							
If flowing, method of flow regulation: Valve Other (describe)			1				
Static Water Level: 64 feet above or below (circle one) land surface Date measured: 6/30/01 Method of Measurement (circle one) steel tape electric tape air line other:							
Method of Measurement (circle one) steel tape electric tape air line other:							
Hole depth: 170 Well depth: 166 Well grouted to a depth of 10 feet Type of grout (circle one): Cement Bentonik Mix Casing length: 146 feet Casing diameter: 4 inches Type of casing: $P \lor C$ Screen length: 2() feet Screen diameter: 4 inches Type of screen: $P \lor C$ Screen slot size: . 010 inches Setting depth: From 146 feet feet Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe):							
Type of grout (circle one): Cement Bentonito Mix Casing length: 146 feet Casing diameter: 4 inches Type of casing: PVC Screen length: 2() feet Screen diameter: 4 inches Type of screen: PVC Screen length: 2() feet Screen diameter: 4 inches Type of screen: PVC Screen slot size: , 010 inches Setting depth: From 146 feet Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe):							
Casing length: <u>146</u> feet Casing diameter: <u>4</u> inches Type of casing: <u>Pvc</u> Screen length: <u>20</u> feet Screen diameter: <u>4</u> inches Type of screen: <u>Pvc</u> Screen slot size: <u>010</u> inches Setting depth: From <u>146</u> feet to <u>166</u> feet Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe): <u>feet</u> If telescoped or more than one screen, describe on back of page Logs run (circle all applicable): Wolog run Electric Gamma Ray Density Sonic Neutron Other: <u>Name of organization running log(s)</u> : 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. WILLIAM L. HARDIN, LIC. NO. 0–802 <u>Char</u> <u>Hardin</u> Signature of Water Well Contractor and License No. Signature of Water Well Contractor and License No.	Hole depth: <u>176</u> Well depth:	166 Well grouted to a depth	n of <u> </u>				
Screen length: 2()feet Screen diameter: 4 inches Type of screen: PVL Screen slot size: . 010 inches Setting depth: From 141. feet to 166. feet Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe):							
Screen slot size: , 010 inches Setting depth: From46feet to166feet Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe):							
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe):							
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): Do 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. WILLIAM L. HARDIN, LIC. NO. 0-802 Print Name of Water Well Contractor and License No. Bignature of Water Well Contractor Bignature Science Scienc							
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:	0	ther (describe):					
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. WILLIAM L. HARDIN, LIC. NO. 0-802 Print Name of Water Well Contractor and License No. Signature of Water Well Contractor RECEIVE	Top of lap pipe or reduction in casing:	feet. If telescoped or more than or	ne screen, describe on back of page				
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. WILLIAM L. HARDIN, LIC. NO. 0-802 Print Name of Water Well Contractor and License No. Signature of Water Well Contractor RECEIVE	Logs run (circle all applicable): No log run	Electric Gamma Ray Density Sonic Neutr	ron Other:				
Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws. GRENN WATER WELL & SUPPLY, INC. WILLIAM L. HARDIN, LIC. NO. 0-802 Print Name of Water Well Contractor and License No. Signature of Water Well Contractor RECEIVE			inchine manufactor of the Milesteria at				
GRENN WATER WELL & SUPPLY, INC. WILLIAM L. HARDIN, LIC. NO. 0-802 Print Name of Water Well Contractor and License No. RECEIVE	•	•					
Print Name of Water Well Contractor and License No. Signature of Water Well Contractor RECEIVE			lations and state laws.				
RECEIVE	WILLIAM L. HARDIN, LIC. NO.	0-802 Cha	2 Hardin				
	Print Name of Water Well Contractor and Lice	ense No. Signat					
JUL 1 5 2009			RECEIVE				
			JUL 1 5 2009				

BY: OLWR

F78

If well telescopes please sketch below and show depths.

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round Level	Description of Formations Encountered From	To
	mined clay 0	26
	blue clay 26	100
	white clay 100	117
	sand 117	162
	tolue clay 18	170
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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; × well Monse drive 1 4) indicate direction. المصحا Tuny Moore Landowner Name: GRENN WATER WELL & SUPPLY, INC.

WILLIAM L. HARDIN, LIC. NO. 0-802

Signature of Water Well Contractor

	STATE WE	LL REPORT					
Permit #: Driller: GRENN WATER WELL & SUPPLY INC 0 9 Date completed: _6/30/09	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 Aquifer: Well #:	78			
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: Tony Moore	Latitude: <u>31°35</u> <u>765</u> Longitude: <u>70°37'(51</u> ''						
Mailing Address: 1631 Farmar	- Ln	Method of Lat/Long (circle one): Conventional Survey,					
		USGS quad, Hand-held GPS, Survey-grade GPS					
Brookhaven MS 3960/ City State Zip Code		<u>NE 1/4 NW 1/4 Sec 8 Twn 7N Rng 6E</u>					
City State	2ip Code	Distance Direction Nearest Town					
Telephone No. (60) 835-9023		10 Miles W of Bree Khaven					
Pump Type		Power Type					
Circle one		C	fircle one				
Air Lift Jet S	ubmersible		ne Engine	Natural Gas			
Bucket Piston T	urbine	Electric Motor Hand		Tractor PTO			
Centrifugal Rotary F	lowing Well		(specify):				
Other (specify):		Horse Power Rating of Motor:					
Date Pump Installed: 6/30/09		Setting Depth: <u>95</u>	fe	eet			
Rated Pump Capacity: Ga	Number of Stages:						
Pump Test Data			easuring Water Le	vel			
Date Well Tested: 6/30/09		(Circle one				
Static Water Level (A): <u>64</u> Feet Below Land Surface			asuring Line	Steel Tape			
Pumping Water Level (B): 72 Feet Be	low Land Surface	Other (specify):					
Drawdown [(B) - (A)]:Feet Be	For flowing well, measured s	hut in head:	feet				
Test Pumping Rate: 13 Ga	Well yielded 13 GPM with a drawdown of						
Duration of Pump Test (minimum 4 hours):	<u> </u>	feet after _	<u> </u>	rs of pumping			
I HEREBY CERTIFY that the above statemen GRENN WATER WELL & SUPPLY, Brian D. McClendon, lic. n	INC. 0. 0-664	Brian M.	edna	re la			
Print Name of Pump Installer and License No.	(if applicable)	Signature of Pump In	nstaller	RECEIVED			

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JUL 1 5 2009 BY: OLWR