

# 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 #: 6526  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: Lincoln  
Permit #: \_\_\_\_\_  
Driller: GRENN WATER WELL & SUPPLY, INC  
Date drilling completed: 9/14/09

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>A. J. Fincher</u> <span style="float: right;">Fincher</span>	Latitude: <u>31.32</u> <sup>44</sup> Longitude: <u>90.29</u> <sup>822</sup>
Mailing Address: <u>102 Beth St.</u>	Method of Lat/Long (circle one): <input type="radio"/> Conventional Survey, <input checked="" type="radio"/> Hand-held GPS, <input type="radio"/> Survey-grade GPS
<u>Brandon MS 39042</u> City State Zip Code	NW USGS quad: <u>SE 1/4 SW 27 Twn 1N Rng 1E</u>
Telephone No. <u>(601) 233-6661</u>	Distance <u>2.5</u> Miles <u>SW</u> of <u>Brookhaven</u>

**Well Data**

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

Date well drilling started: 9/14/09 Date well drilling completed: 9/14/09

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

Static Water Level: 67 feet above or below (circle one) land surface Date measured: 9/14/09

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

Hole depth: 195 Well depth: 192 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement  Bentonite  Mix

Casing length: 182 feet Casing diameter: 4 inches Type of casing: PVC

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

Screen slot size: .010 inches Setting depth: From 182 feet to 192 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

*Brian McClendon*

Print Name of Water Well Contractor and License No.

Signature of Water Well Contractor

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BY: OLWR



# 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 #: 6526

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

County: Lincoln

Permit #: \_\_\_\_\_

Driller: GRENN WATER WELL & SUPPLY, INC

Date completed: 9/15/09

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>A. J. Fincher</u>	Latitude: <u>31° 32' - 739"</u> Longitude: <u>90° 29' 222</u> <span style="margin-left: 100px;">44</span> <span style="margin-left: 100px;">49</span>
Mailing Address: <u>102 Beth St.</u>	Method of Lat/Long (circle one): Conventional Survey,
<u>Brandon MS 39042</u>	USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS
City State Zip Code	<u>SE 1/4 NW 1/4 Sec 27 Twn 7N Rng 7E</u>
Telephone No. <u>(601) 233-6661</u>	<u>NW SW</u> Direction Nearest Town <u>2.5</u> Miles <u>SW</u> of <u>Brookhaven</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet <input type="radio"/> <u>Submersible</u>	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston Turbine	<u>Electric Motor</u> Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>1/2</u>
Date Pump Installed: <u>9/15/09</u>	Setting Depth: <u>100</u> feet
Rated Pump Capacity: <u>10</u> Gallons Per Minute	Number of Stages: <u>1</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>9/15/09</u>	Air Line <input type="radio"/> <u>Electric Measuring Line</u> Steel Tape
Static Water Level (A): <u>67</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>71</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>4</u> Feet Below Land Surface	Well yielded <u>12</u> GPM with a drawdown of
Test Pumping Rate: <u>12</u> Gallons Per Minute	<u>4</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 L. HARDIN, LIC. NO. 0-802  
 Print Name of Pump Installer and License No. (if applicable)

William Hardin  
 Signature of Pump Installer

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OCT 02 2009

BY: OLWR