County: Lincoln
Permit #:
Driller: GRENN WATER WELL &
Driller: GRENN WATER WELL & SUPPLY, INC. 2/3/06  Date drilling completed: 2/3/06
Date drilling completed:

## **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 #:	<del>1</del> 49
L. S. Blevation:	G 558
B-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.

30 days of completion of thining of the wen.	137-11 Y41			
Well Owner Information	Well Location			
Owner Name Soe: Free Man II	Latitude: 3/ • 3/ • 555" Longitude: 50 • 29 · 28/ "			
Mailing Address: 214 Auburn Dr. 5W	Method of Lat/Long (circle one): Conventional Survey,			
	USGS quad, Hand-held GPS Survey-grade GPS			
Boque Chitto MS 39629 City State Zip Code	1/16/4 55/4 Sec 4 Twn 1/2 Rng 7/5 Rng			
Telephone No. (60/) 82-3-6457.	Distance Direction Nearest Town  Miles NE of West Lincoln			
Well I	Data			
Purpose of Well (circle one) Home Industrial Public Supply	, /			
Date well drilling started: 2/3/06 Date	well drilling completed: $\frac{2/3/06}{}$			
If flowing, method of flow regulation: Valve Other (d				
Static Water Level:feet above of below frircle one) l	land surface Date measured: 2/3/06			
Method of Measurement (circle one) steel tape electric tape	<u> </u>			
Hole depth: 84 Well depth: 50	Well grouted to a depth offeet			
Type of grout (circle one): Cement Bentonite Mix	1 1			
Casing length: 70 feet Casing diameter:				
Screen length: 10 feet Screen diameter: 1	_			
Screen slot size: <u>10/0</u> inches Setting depth: From _	70 feet to 80 feet			
Type of completion (circle all applicable): Gravel packed Under	reamed Telescoped Open hole Natural Development			
Other (describe):				
Top of lap pipe or reduction in casing:feet. If te	elescoped or more than one screen, describe on back of page			
Logs run (circle all applicable) No log pun Electric Gamma Ray Density Sonic Neutron Other:				
Name of organization running log(s):				
I certify that the well was drilled, constructed, and completed in a	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 ME / Undor			
Print Name of Water Well Contractor and License No.	Signature of Water Well Contractor			

Bround.

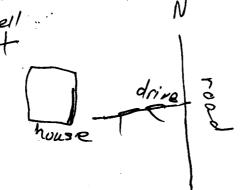
	1
,	1

Ground Level		
	1	

Description of Formations Encountered	Prom_	To
red day	0	17
Streak	17	60
sandt gravel	60	00
white clay	180	124
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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; 4) indicate direction.



Landowner Name: Joe Freeman II

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

Signature of Water Well Contractor

## STATE WELL REPORT

Part 2

County: L

Permit #:

Driller: GRENN WATER WELL &

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

For Office Use Only:		
Aquifer:	6558	
Well#:	<b>&gt;</b> 70	
Elevation:		

SUPPLY, INC. Date completed: 2/3/06	Jackson, MS 39289-0631 (601)961-5210 (601)354-6938 (fax)				
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 Informati	on		Well Location		
Owner Name: For Freeman II  Mailing Address: 214 Auburn Dr SW		Latitude: 3: 31 555 Longitude: 90 24 281 /7  Method of Lat/Long (circle one): Conventional Survey,			
Boque Chi Ho MS 39629  City State Zip Code		USGS quad, Hand-held GPS Survey-grade GPS  No. 14 SE 4 Sec Twn Rng 7E  SW  Distance Direction Nearest Town			
Telephone No. (661) 223-6457			E of West L.	neeln	
Ритр Туре			Domar T-		
Circle one			Power Type Circle one		
Air Lift Jet (	Submersible	Diesel Engine	Gasoline Engine	Natural Gas	
Bucket Piston	Turbine (	Electric Motor	Hand	Tractor PTO	
Centrifugal Rotary Other (specify):	Flowing Well	Windmill  Horse Power Rating of	Other (specify):		
Date Pump Installed: 2/3/06		Setting Depth:	70	feet	
Rated Pump Capacity:			9		
Pump Test Data  Date Well Tested: 2/3/06  Static Water Level (A): 54 Feet Pumping Water Level (B): 62 Feet Pumping Rate: 12  Duration of Pump Test (minimum 4 hours):	Below Land Surface Below Land Surface Gallons Per Minute	Air Line Elec Other (specify): For flowing well, mea	d of Measuring Water Circle one  tric Measuring Line  usured shut in head: GPM with a	Steel Tape	

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) Signature of Pump Installer