

# 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 #: H-97  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: Lincoln  
Permit #: \_\_\_\_\_  
Driller: GRENN WATER WELL & SUPPLY, INC.  
Date drilling completed: 6/17/05

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>Betty Dunaway</u>         | Latitude: <u>31° 32' 27.5"</u> Longitude: <u>90° 23' 14.8"</u>     |
| Mailing Address: <u>1568 Maura Ln SE</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>NW 1/4 SE 1/4 Sec 27 Twn 7N Rng 8E</u>                          |
| Telephone No. <u>(601) 833-2784</u>      | Distance Direction Nearest Town<br><u>4 Miles SE of Brookhaven</u> |

**Well Data**

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

Date well drilling started: 6/17/05 Date well drilling completed: 6/17/05

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

Static Water Level: 75 feet above or below (circle one) land surface Date measured: 6/17/05

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

Hole depth: 205 Well depth: 195 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 185 feet Casing diameter: 4 inches Type of casing: PVC

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

Screen slot size: 10/10 inches Setting depth: From 185 feet to 205 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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AUG 23 2005  
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 #: H-97

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

County: Lincoln  
 Permit #: \_\_\_\_\_  
 Driller: GRENN WATER WELL & SUPPLY, INC.  
 Date completed: 8/16/05

**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>Betty Dunaway</u>         | Latitude: <u>31° 32' 775"</u> Longitude: <u>90° 23' 143"</u> |
| Mailing Address: <u>1568 Maura Ln SE</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>NW 1/4 SE 1/4 Sec 27 Twn 7N Rng 8E</u>                    |
| Telephone No. <u>(601) 833-2784</u>      | Distance Direction Nearest Town                              |
|  | <u>4 Miles SE of Brookhaven</u>                              |

| Pump Type<br>Circle one                           | Power Type<br>Circle one                  |
|---|---|
| Air Lift Jet <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>3</u>     |
| Date Pump Installed: <u>8/16/05</u>               | Setting Depth: <u>120</u> feet            |
| Rated Pump Capacity: <u>40</u> Gallons Per Minute | Number of Stages: <u>9</u>                |

| Pump Test Data   | Method of Measuring Water Level<br>Circle one       |
|--|---|
| Date Well Tested: <u>8/16/05</u>                           | Air Line <u>Electric Measuring Line</u> Steel Tape  |
| Static Water Level (A): <u>75</u> Feet Below Land Surface  | Other (specify): _____                              |
| Pumping Water Level (B): <u>85</u> Feet Below Land Surface | For flowing well, measured shut in head: _____ feet |
| Drawdown [(B) - (A)]: <u>10</u> Feet Below Land Surface    | Well yielded: <u>60</u> GPM with a drawdown of      |
| Test Pumping Rate: <u>60</u> Gallons Per Minute            | <u>10</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**

AUG 23 2005

BY: OLWR