

# 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-98  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: Lincoln  
Permit #: \_\_\_\_\_  
Driller: GRENN WATER WELL & SUPPLY, INC.  
Date drilling completed: 8/3/05

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>Alfords Lumber</u>	Latitude: <u>31° 33' 54"</u> Longitude: <u>90° 26' 78"</u>
Mailing Address: <u>P O Box 37</u>	Method of Lat/Long (circle one): <u>33</u> Conventional Survey, <u>47</u>
<u>McCall Creek MS 39647</u>	USGS quad, <u>Hand-held GPS</u> Survey-grade GPS
City State Zip Code	<u>NW 1/4 SW 1/4 Sec 19 Twn 7N Rng 8E</u>
Telephone No. <u>(601) 876-2292</u>	Distance Direction Nearest Town <u>.5</u> Miles <u>S</u> of <u>Brookhaven</u>

Well Data

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

Date well drilling started: 8/3/05 Date well drilling completed: 8/3/05

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

Static Water Level: 41 feet above or below (circle one) land surface Date measured: 8/3/05

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

Hole depth: 164 Well depth: 157 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement  Bentonite Mix

Casing length: 147 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 147 feet to 157 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  
Signature of Water Well Contractor

Print Name of Water Well Contractor and License No.

RECEIVED  
AUG 23 2005  
BY: OLWR

H-98

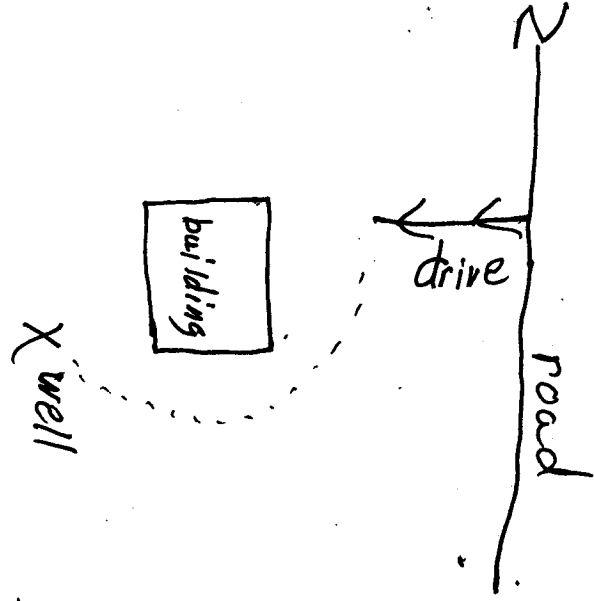
If well telescopes please sketch below and show depths.

Ground Level

Description of Formations Encountered	From	To
red clay	0	8
sand & gravel	8	61
white clay	61	77
blue clay	77	110
streaky	110	130
sand	130	159
white clay	159	164

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: Alford's Lumber

Brian McClendon  
Signature of Water Well Contractor

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

# 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-98

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

County: Lincoln  
 Permit #: \_\_\_\_\_  
 Driller: GRENN WATER WELL & SUPPLY, INC.  
 Date completed: 8/14/05

**This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the installation of pump.**

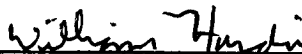
Well Owner Information	Well Location
Owner Name: <u>Alford's Lumber</u> Mailing Address: <u>PO Box 37</u> <u>McCall Creek MS 39647</u> <small>City State Zip Code</small> Telephone No. <u>(601) 876-2292</u>	Latitude: <u>31° 33' 54.8"</u> Longitude: <u>90° 26' 7.85"</u> Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS <u>NW ¼ SW ¼ Sec 19 Twn 7N Rng 8E</u> Distance Direction Nearest Town <u>.5 Miles S of Brookhaven</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet <input type="radio"/> <u>Submersible</u> Bucket Piston <input type="radio"/> Turbine <input type="radio"/> Centrifugal Rotary <input type="radio"/> Flowing Well <input type="radio"/> Other (specify): _____ Date Pump Installed: <u>8/14/05</u> Rated Pump Capacity: <u>16</u> Gallons Per Minute	Diesel Engine <input type="radio"/> Gasoline Engine <input type="radio"/> Natural Gas <input type="radio"/> <u>Electric Motor</u> <input type="radio"/> Hand <input type="radio"/> Tractor PTO <input type="radio"/> Windmill <input type="radio"/> Other (specify): _____ Horse Power Rating of Motor: <u>1</u> Setting Depth: <u>70</u> feet Number of Stages: <u>10</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>8/14/05</u> Static Water Level (A): <u>41</u> Feet Below Land Surface Pumping Water Level (B): <u>48</u> Feet Below Land Surface Drawdown [(B) - (A)]: <u>7</u> Feet Below Land Surface Test Pumping Rate: <u>20</u> Gallons Per Minute Duration of Pump Test (minimum 4 hours): <u>4</u> hours	Air Line <input type="radio"/> <u>Electric Measuring Line</u> <input type="radio"/> Steel Tape <input type="radio"/> Other (specify): _____ For flowing well, measured shut in head: _____ feet Well yielded <u>20</u> GPM with a drawdown of <u>7</u> feet after <u>4</u> hours of pumping

**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

RECEIVED

AUG. 23 2005

BY: OLWR