

# State Well Report

## Part I

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)

County: Lincoln  
Permit #: \_\_\_\_\_  
Driller: GRENN WATER WELL & SUPPLY, INC.  
Date drilling completed: 9/14/05

For Office Use Only:  
Aquifer: \_\_\_\_\_  
Well #: K-74  
L. S. Elevation: \_\_\_\_\_  
E-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.

| Well Owner Information                         | Well Location   |
|--|---|
| Owner Name: <u>Aubrey Everett</u>              | Latitude: <u>31.29.792</u> Longitude: <u>90.34.967</u>                    |
| Mailing Address: <u>1733 Hurricane Lake Dr</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>1N E 1/4 NE 1/4 Sec 15 Twn 6N Rng 6E</u>                               |
| Telephone No. <u>(601) 823-4567</u>            | Distance <u>4</u> Miles Direction <u>SW</u> of Nearest Town <u>LUCIEN</u> |

Well Data

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

Date well drilling started: 9/14/05 Date well drilling completed: 9/14/05

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

Static Water Level: 47 feet above or below (circle one) land surface Date measured: 9/14/05

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

Hole depth: 72 Well depth: 68 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 58 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 58 feet to 68 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

Print Name of Water Well Contractor and License No. \_\_\_\_\_ Signature of Water Well Contractor Brian McClendon

RECEIVED  
NOV 18 2005  
BY: OLWE



# 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 #: R-574

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

County: Lincoln  
Permit #: \_\_\_\_\_  
Driller: GRENN WATER WELL & SUPPLY, INC.  
Date completed: 10/22/05

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>Aubrey Everett</u>              | Latitude: <u>31° 29' 792"</u> Longitude: <u>90° 34' 967"</u> |
| Mailing Address: <u>1733 Hurricane Lake Dr</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>NE 1/4 NE 1/4 Sec 15 Twn 6N Rng 6E</u>                    |
| Telephone No. <u>(601) 823-4567</u>            | Distance Direction Nearest Town                              |
|  | <u>4 Miles SW of Lucien</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>1/2</u>   |
| Date Pump Installed: <u>10/22/05</u>              | Setting Depth: <u>66</u> feet             |
| Rated Pump Capacity: <u>10</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>10/22/05</u>                          | Air Line <u>Electric Measuring Line</u> Steel Tape  |
| Static Water Level (A): <u>47</u> Feet Below Land Surface  | Other (specify): _____                              |
| Pumping Water Level (B): <u>52</u> Feet Below Land Surface | For flowing well, measured shut in head: _____ feet |
| Drawdown [(B) - (A)]: <u>5</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>5</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  
NOV 18 2005  
BY: OLWR