	STATE '	WELL REPORT		
County: Lincoln	.= <del></del>	Part 1	For Office Use Only:	
•		riller's Log	Well #: 101	
Permit #: GRENN WATER WELL &	Mississippi Depart	ment of Environmental Quality and and Water Resources	Aquifer:	
Oriller: SUPPLY, INC.	1	P.O. Box 2309	E-Log #:	
Date drilling completed: 1-14-15		on, MS 39225-2309	E-Log #:	
(601)961-5210 (601)360-0535 (fax)  State Law requires that this report be prepared by the license holder responsible for the work and filed with the Department at the above address within 30 days of completion of drilling of the well or borehole.				
State Law requires that this report	be prepared by the	license holder responsible for t	he work and filed with the N $^3$	
Department at the above address w	vithin 30 days of co	mpletion of drilling of the well	or borehole.	
Well Owner Informat (Landowner if borehole is not for	ion	31° 27' 42' Well or Bore	ehole Location 7 6 3 5	
0.		Latitude: 31 27.711 Lor	ngitude: 90° 35.728	
Owner Name: Kobert Legg	<del></del>	Method of Lat/Long (check one	e): Conveptional Survey,	
Mailing Address:		Wast.		
1974 Gene Rd.		USGS quad, Hand-held GPS, Survey-grade GPS		
Boque Chitto, Ms. State	39629	NW 1/4 NW 1/4, Sec_	27 T6N R6E	
City	Zip Code	9 Miles NW	Bogue Chitte	
Telephone No. (281) 709 - 13.53		. (Distance) (Direction)	(Nearest Town)	
	Well / I	Borehole Data		
Date drilling started: 1-14-15 Date		•	Hole diameter: 7	
Location of the source of any surface water used for drilling:				
Method of dosing and volume of Chlorine used in drilling and development: Muspit Gravelpack				
Logs run (circle all applicable): No log	rษก์ Electric Gam	nma Ray Density Sonic Neutro	on Other:	
Name of organization running log(s):				
Purpose of borehole (circle one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump				
Seisn	nic Survey Other	(describe)		
If drilling is not related to water well construction, skip the remainder of this block				
	Nome Industrial			

Other (describe):\_ If a flowing well, method of flow regulation: Valve \_\_\_\_\_ Other (describe) \_feet [above or below] land surface Date measured: \_\_ (circle one) 40 Static Water Level: \_ Method of measurement (circle one): Steel tape [lectric tape Air line Other (describe): Well depth: Well grouted to a depth of: 10 feet Type of grout (circle one): Neat Cement Bentonite Mix Casing length: 56 feet \_\_inches Type of casing: PVC Casing diameter: \_\_\_ Screen length: 10 feet Screen diameter: \_\_ inches Screen slot size: \_\_OLO\_\_inches Setting depth: From \_\_ \_feet\_to Type of completion (circle all applicable) Gravel packed Underreamed Open hole Natural Development Other (describe): Top of lap pipe or reduction in casing: If telescoped or more than one screen, describe on next page

Form: OLWR-SWR-1A (4/13)

and boreholes, unless specifically exempted by regulations.  Bescription of Formations Encountered From (depth) To (depth Pad Clay Ground level 2!  Sand 1/65  Yellow Clay 688  Wellow Clay 688	County: Lincoln Permit #:		For Office Use Only: Well #: 159
Description of Formations Encountered From (depth) To (depth PRO Clay Ground level 21  Sand 2165  Yellow Clay 688  In the well coation of each on sketch  Sand 1165  Yellow Clay 688  In the well coation 1 property layout and include the following:  I) the well coation 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) north arrow  Rowan Ln.  Rowan L	The sketch below only required for water wells  If well telescopes, show depths on sketch	Description of formations enco and boreholes, unless specifical	untered must be provided for all we lly exempted by regulations
more than one screen, show location of each on sketch  setch the property layout and include the following:  1) the well location 2) any premanent 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) north arrow  Trensformer   Delaware Ln.   Tackson Liberty Dr.    Rowan Ln.   Delaware Ln.   Tackson Liberty Dr.    Rowan Ln.   Tacks		Description of Formations Encount	ered From (depth) To (depth)
more than one screen, show location of each on 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) north arrow  Trenstormer  Trenstormer  Anive  Delaware Ln.  Rowan Ln.  Rowan Ln.  Rowan Ln.  Rowan Ln.  Rowan Ln.  Additional the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations policiable, and state laws.  LAN D. McCLENDON UNR-0000664  Land D. McCLENDON UNR-0000664	<u></u>	red clay	
more than one screen, show location of each on 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) north arrow  Trenstormer  Trenstormer  Anive  Delaware Ln.  Rowan Ln.  Rowan Ln.  Rowan Ln.  Rowan Ln.  Rowan Ln.  Additional the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations policiable, and state laws.  LAN D. McCLENDON UNR-0000664  Land D. McCLENDON UNR-0000664			
more than one screen, show location of each on sketch  etch 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) north arrow  Trensformer  Alrive  Delaware Ln.  Liberty Dr.  Rowar Ln.  Rowart Legg  EREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable pullerments of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations popilicable, and state laws.  IAN D. McCLENDON UNR-0000664  1-14-15  Briand State Mays.  Show Liberty Dr.  Roward Certification and State Laws.  And D. McCLENDON UNR-0000664  1-14-15  Briand State Mays.  Roward Clayborn  Roward		Sand	2165
more than one screen, show location of each on sketch  etch 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) north arrow  Trensformer  Alrive  Delaware Ln.  Liberty Dr.  Rowar Ln.  Rowart Legg  EREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable pullerments of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations popilicable, and state laws.  IAN D. McCLENDON UNR-0000664  1-14-15  Briand State Mays.  Show Liberty Dr.  Roward Certification and State Laws.  And D. McCLENDON UNR-0000664  1-14-15  Briand State Mays.  Roward Clayborn  Roward		1011.	1.012
more than one screen, show location of each on 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) north arrow  Transformer  Transformer  Delaware Ln.  Identity  Of.  Rowan Ln.  Rowert Legg  EREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable purements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations applicable, and state laws.  IAN D. McCLENDON UNR-00000664  1-14-15  Rowan McCLENDON UNR-00000664	İ	yerrow chay	65 68
more than one screen, show location of each on 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) north arrow  Transformer  Transformer  Delaware Ln.  Identity  Of.  Rowan Ln.  Rowert Legg  EREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable purements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations applicable, and state laws.  IAN D. McCLENDON UNR-00000664  1-14-15  Rowan McCLENDON UNR-00000664			
more than one screen, show location of each on 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) north arrow  Transformer  Transformer  Delaware Ln.  Identity  Of.  Rowan Ln.  Rowert Legg  EREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable purements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations applicable, and state laws.  IAN D. McCLENDON UNR-00000664  1-14-15  Rowan McCLENDON UNR-00000664			
more than one screen, show location of each on 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) north arrow  Transformer  Transformer  Delaware Ln.  Identity  Of.  Rowan Ln.  Rowert Legg  EREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable purements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations applicable, and state laws.  IAN D. McCLENDON UNR-00000664  1-14-15  Rowan McCLENDON UNR-00000664			
more than one screen, show location of each on 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) north arrow  Transformer  Transformer  Delaware Ln.  Identity  Of.  Rowan Ln.  Rowert Legg  EREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable purements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations applicable, and state laws.  IAN D. McCLENDON UNR-00000664  1-14-15  Rowan McCLENDON UNR-00000664			<u> </u>
more than one screen, show location of each on 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) north arrow  Transformer  Transformer  Delaware Ln.  Identity  Of.  Rowan Ln.  Rowert Legg  EREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable purements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations applicable, and state laws.  IAN D. McCLENDON UNR-00000664  1-14-15  Rowan McCLENDON UNR-00000664	Sept. 10 Miles		
more than one screen, show location of each on 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) north arrow  Transformer  Transformer  Delaware Ln.  Identity  Of.  Rowan Ln.  Rowert Legg  EREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable purements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations applicable, and state laws.  IAN D. McCLENDON UNR-00000664  1-14-15  Rowan McCLENDON UNR-00000664	1011	:	
more than one screen, show location of each on 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) north arrow  Transformer  Transformer  Delaware Ln.  Identity  Of.  Rowan Ln.  Rowert Legg  EREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable purements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations applicable, and state laws.  IAN D. McCLENDON UNR-00000664  1-14-15  Rowan McCLENDON UNR-00000664			
more than one screen, show location of each on 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) north arrow  Transformer  Transformer  Delaware Ln.  Identity  Of.  Rowan Ln.  Rowert Legg  EREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable purements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations applicable, and state laws.  IAN D. McCLENDON UNR-00000664  1-14-15  Rowan McCLENDON UNR-00000664			
Trensformer  Trens	**		
Trensformer  Trens			
Trensformer  Trens			
Trensformer  Trens			
Trensformer  Trens			
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) north arrow  Transformer  Transformer  Delaware Ln.  Transformer  Transformer  Transformer  Transformer  Transformer  Delaware Ln.  Adowner Name: Robert Legg  EREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable purrements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations applicable, and state laws.  IAN D. McCLENDON UNR-00000664  1-14-15  Bruan McCLENDON Constructed  B	more than one screen, show location of each on sketch		
EREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable suirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations applicable, and state laws.  IAN D. McCLENDON UNR-00000664	1) the well location 2) any permanent structures on the property that may 3) any roads, power lines, or other items that may aid 4) north arrow  Transformer  Idrive	Delaware Ln.	Liberty
EREBY CERTIFY that the well/borehole was drilled, constructed, and completed in accordance with all applicable suirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations applicable, and state laws.  IAN D. McCLENDON UNR-00000664	ndowner Name: Robert Lege		,
- 17 1) Was III ( wood 1	EREBY CERTIFY that the well/borehole was drilled.	constructed, and completed in acc	ordance with all applicable Department of Health regulations
- 17 1) Was III ( wood 1	quirements of the Mississippi Department of Enviror applicable, and state laws.	• • • • • • • • • • • • • • • • • • • •	
ON COMPANY OF COMPANY PROPERTY AND ADDRESS OF TAXABLE AND ADDRESS OF	ipplicable, and state laws.		11150 1-

The hard have by

## JAN 3 1 2015

## STATE WELL REPORT

## County: Lincoln Permit #: Driller: GRENN WATER WELL & SUPPLY, INC Date completed:

Copy information from block on Part 1

## **Pump Installer's Completion Report**

Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 2309

Part 2

Jackson, MS 39225-2309 (601)961-5210 (601) 360-0535 (fax)

For Office Use Only:	i i
Well #:   O   I	
riquitori	

This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part I of the report must be attached and both parts filed with the Department at the above address within 30 days of well completion. Well Owner Information Well Location Latitude: 31° 27.711 Longitude: 96° 35.728

Owner Name: Kabert Method of Lat/Long (check one): Conventional Survey\_ Mailing Address: USGS quad . Hand-held GPS . Survey-grade GPS NW 1/4 NW/4, Sec 27 T6N Telephone No. (281) 709-7353

Pump Type	(circle one)				
Submersible urbine Air Lift Centrifugal Flowing Well Je	et Piston Rotary Other (describe):				
Date Pump Installed: 1-21-15 Rat	ed Pump Capacity:Gallons Per Minute				
Is This Pump (circle one): New Repaired Replacement					
Power Type (circle one)					
Electric Diesel Gasoline Natural Gas Tractor PTO Windmill Other (describe):					
Horse Power Rating of Motor: Setting Depth:	65feet Number of Stages:				
Pump Test Data for Non Flowing Well					
Date Well Tested: 1-21-15	Duration of Pump Test ( <i>minimum 4 hours</i> ): hours				
Static Water Level (A): Feet Below Land Surface	Pumping Water Level (B): Feet Below Land Surface				
Drawdown [(B) - (A)]:Feet Below Land Surface Test Pumping Rate: Gallons Per Minute					
Method of measurement (circle one): Steel tape (Electric tape) Air line Other (describe):					
Pump Test Data	for Flowing Well				
Measured shut in head:feet.					
Well yieldedGPM with a drawdown of	feet_afterhours of pumping				
Meter Installation					
Meter Manufacturer:	Meter Serial Number:				
Meter Model Number/Name:	Type of Meter:				
Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc).					
Installation Date: Meter installed by:					
Is This Meter (circle one): New Repaired Replacement					
Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards.  For agricultural wells, a list of approved meters is on the MDEQ website.					

I HEREBY CERTIFY that the above statements are true to the best of my knowledge

MICHAEL W. KEES RPO-00000801 Print Name of Pump Installer and License No. (if applicable)

Signature of Pump Installer

Form: OLWR-SWR-1B (4/13)