

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: <u>N 34</u>	
Well #:	
L. S. Elevation:	
E-log #:	

County: <u>Lincoln</u>
Permit #:
Driller: <u>GRENN WATER WELL & SUPPLY, INC.</u>
Date drilling completed: <u>4/27/11</u>

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.

<p style="text-align: center;">Well Owner Information</p> <p>Owner Name: <u>Peyton Green</u></p> <p>Mailing Address: <u>3670 Pleasant Grove Rd</u></p> <p><u>Ruth</u> <u>MS</u> <u>39601</u> City State Zip Code</p> <p>Telephone No. <u>(601) 748-0448</u></p>	<p style="text-align: center;">Well Location</p> <p>Latitude: <u>31° 26' 58"</u> Longitude: <u>90° 16' 30"</u></p> <p>Method of Lat/Long (circle one): <u>Conventional Survey</u></p> <p>USGS quad, <u>Hand-held GPS</u>, Survey-grade GPS</p> <p><u>NE 1/4 NW 1/4 Sec 35 Twn 6 N Rng 9 E</u></p> <p>Distance Direction Nearest Town <u>4</u> Miles <u>N</u> of <u>Ruth</u></p>
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Well Data

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

Date well drilling started: 4/27/11 Date well drilling completed: 4/27/11

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

Static Water Level: 75 feet above or below (circle one) land surface Date measured: 4/27/11

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

Hole depth: 137 Well depth: 130 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 120 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 120 feet to 130 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.
WILLIAM L. HARDIN, LIC. NO. 0-802

Print Name of Water Well Contractor and License No. William L. Hardin

Signature of Water Well Contractor William L. Hardin

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MAY 26 2011
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 #: _____
Elevation: _____

County: Lincoln
Permit #: _____
Greenn Water Well & Supply, Inc.
Date completed: 4-28-11

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>PEYTON GREEN</u>	Latitude: <u>31.26481°</u> Longitude: <u>90.16330°</u>
Mailing Address: <u>3670 PLEASANT GROVE RD.</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS
<u>Roth</u> MS <u>39601</u>	<u>NE 1/4 NW 1/4 Sec. 35 Twn 6N Rng 9E</u>
City State Zip Code	Distance Direction Nearest Town
Telephone No. <u>(601) 748 0448</u>	<u>4</u> Miles <u>N</u> of <u>Roth</u>

Pump Type Circle one	Power Type 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>4-28-11</u>	Setting Depth: <u>110</u> feet
Rated Pump Capacity: <u>10</u> Gallons Per Minute	Number of Stages: <u>12</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>4-28-11</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>80</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>80</u> Feet Below Land Surface	Well yielded <u>10</u> GPM with a drawdown of
Test Pumping Rate: <u>10</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.
MICHAEL W. KEES, LIC. NO. 0-801P
Print Name of Pump Installer and License No. (if applicable)

Michael Kees
Signature of Pump Installer

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MAY 26 2011

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