

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 #: Q-98
L. S. Elevation:
E-log #:

County: Lincoln
Permit #:
Driller: GRENN WATER WELL & SUPPLY, INC.
Date drilling completed: 2/14/08

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: Robin Case, 3211 Chickholm Ln SW, Bogu Chitto MS 39629, (601) 757-8313
Well Location: Latitude: 31.22.965, Longitude: 90.35.197, Method of Lat/Long: Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS, SW 1/4 SE 1/4 Sec 22 Twn 5N Rng 6E, Distance 9 Miles SW of Bogu Chitto

Well Data: Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other:
Date well drilling started: 2/14/08 Date well drilling completed: 2/14/08
If flowing, method of flow regulation: Valve Other (describe)
Static Water Level: 52 feet above or below (circle one) land surface Date measured: 2/14/08
Method of Measurement (circle one) steel tape electric tape air line other:
Hole depth: 93 Well depth: 88 Well grouted to a depth of 10 feet
Type of grout (circle one): Cement Bentonite Mix
Casing length: 78 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 78 feet to 88 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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If well telescopes please sketch below and show depths.

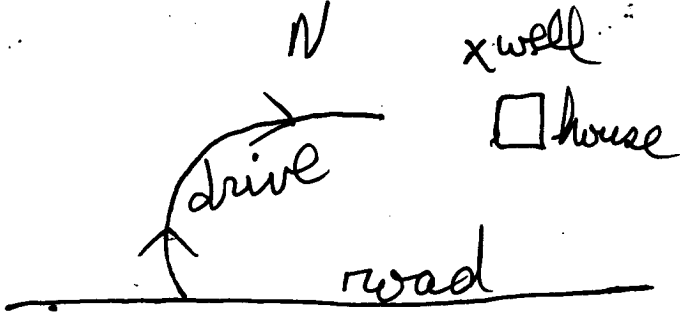
Q-98-

Ground Level

Description of Formations Encountered	From	To
red clay	0	15
streaky	15	78
sand & gravel	78	88
white clay	88	99

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: Robin Case

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)

County: Lincoln
 Permit #: _____
 Driller: GRENN WATER WELL & SUPPLY, INC
 Date completed: 2/14/08

For Office Use Only:

Aquifer: _____
 Well #: Q-98
 Elevation: _____

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>Robin Case</u> Mailing Address: <u>3211 Chickalmdr SW</u> <u>Booneville MS 39629</u> <small>City State Zip Code</small> Telephone No. (601) <u>757-8313</u>	Latitude: <u>31°22'46.5"</u> Longitude: <u>90°35'19.7"</u> Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>(Hand-held GPS)</u> Survey-grade GPS <u>SW 1/4 SE 1/4 Sec 22 Twn 5N Rng 6E</u> Distance Direction Nearest Town <u>9 Miles SW of Booneville</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet <u>(Submersible)</u> Bucket Piston Turbine Centrifugal Rotary Flowing Well Other (specify): _____ Date Pump Installed: <u>2/14/08</u> Rated Pump Capacity: _____ Gallons Per Minute	Diesel Engine Gasoline Engine Natural Gas <u>(Electric Motor)</u> Hand Tractor PTO Windmill Other (specify): _____ Horse Power Rating of Motor: <u>1/2</u> Setting Depth: <u>82</u> feet Number of Stages: <u>9</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>2/14/08</u> Static Water Level (A): <u>52</u> Feet Below Land Surface Pumping Water Level (B): <u>55</u> Feet Below Land Surface Drawdown [(B) - (A)]: <u>3</u> Feet Below Land Surface Test Pumping Rate: <u>13</u> Gallons Per Minute Duration of Pump Test (minimum 4 hours): <u>4</u> hours	Air Line <u>(Electric Measuring Line)</u> Steel Tape Other (specify): _____ For flowing well, measured shut in head: _____ feet Well yielded <u>13</u> GPM with a drawdown of <u>3</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)

William Hardin
 Signature of Pump Installer

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 BY OLWR