

STATE WELL REPORT

Part 1

Driller's Log

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225-2309
(601)961-5210
(601)360-0535 (fax)

For Office Use Only:

Well #: 10096
Aquifer: SPRT
E-Log #: _____

County: Madison
Permit #: GW-17149
Driller: Griner Drilling Service, Inc.
Date drilling completed: 2/17

11/1/16 based on permit

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.

Well Owner Information <small>(Landowner if borehole is not for a water well)</small>	Well or Borehole Location
Owner Name: <u>City of Ridgeland</u>	Latitude: <u>32 25 32.12</u> Longitude: <u>90 12 06.82W</u>
Mailing Address: <u>Post Office Box 217</u>	Method of Lat/Long (check one): Conventional Survey _____ USGS quad <input checked="" type="checkbox"/> Hand-held GPS _____, Survey-grade GPS _____
<u>Ridgeland</u> <u>Mississippi</u> <u>39157</u> City State Zip Code	<u>SE 1/4 NW 1/4</u> , Sec 28 T. 7N R. 1E
Telephone No. (601) <u>853-2027</u>	_____ Miles <u>E</u> of <u>Ridgeland</u> (Distance) (Direction) (Nearest Town)

Well / Borehole Data
Date drilling started: <u>9/15</u> Date drilling completed: <u>2/17</u> Hole depth: <u>1,258</u> Hole diameter: <u>9 7/8</u>
Location of the source of any surface water used for drilling: <u>Public Water Supply</u>
Method of dosing and volume of Chlorine used in drilling and development: <u>Public Water Supply</u>
Logs run (circle all applicable): No log run <input type="checkbox"/> <input checked="" type="checkbox"/> Electric <input checked="" type="checkbox"/> Gamma Ray <input type="checkbox"/> Density <input type="checkbox"/> Sonic <input type="checkbox"/> Neutron <input type="checkbox"/> Other: <u>RECEIVED</u>
Name of organization running log(s): <u>Griner Drilling Service, Inc.</u> FEB 15 2017
Purpose of borehole (circle one): <input checked="" type="checkbox"/> Water Well <input type="checkbox"/> Geotechnical/Geological Investigation <input type="checkbox"/> Ground Source Heat Pump <input type="checkbox"/> Seismic Survey <input type="checkbox"/> Other (describe) _____ BY OLWR
<i>If drilling is not related to water well construction, skip the remainder of this block</i>
Purpose of Well (circle all applicable): Home <input type="checkbox"/> Industrial <input type="checkbox"/> <input checked="" type="checkbox"/> Public Supply <input type="checkbox"/> Irrigation <input type="checkbox"/> Fish Culture
Other (describe): _____
If a flowing well, method of flow regulation: Valve _____ Other (describe) _____
Static Water Level: <u>411</u> feet [above or <input checked="" type="checkbox"/> below] land surface Date measured: <u>12/28/2016</u> <small>(circle one)</small>
Method of measurement (circle one): Steel tape <input type="checkbox"/> <input checked="" type="checkbox"/> Electric tape <input type="checkbox"/> Air line <input type="checkbox"/> Other (describe): _____
Well depth: <u>1,216</u> Well grouted to a depth of: <u>1,146</u> feet Type of grout (circle one): <input checked="" type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite Mix
Casing length: <u>1,146</u> feet Casing diameter: <u>16</u> inches Type of casing: <u>Black Steel A 53GB</u>
Screen length: <u>60</u> feet Screen diameter: <u>10</u> inches Type of screen: <u>304 Wire Wrap</u>
Screen slot size: <u>.020</u> inches Setting depth: From <u>1,156</u> feet to <u>1,216</u> feet
Type of completion (circle all applicable): <input checked="" type="checkbox"/> Gravel packed <input type="checkbox"/> Underreamed <input type="checkbox"/> Open hole <input type="checkbox"/> Natural Development
Other (describe): _____
Top of lap pipe or reduction in casing: <u>1,066</u> feet
<i>If telescoped or more than one screen, describe on next page</i>

STATE WELL REPORT

Part 2

Pump Installer's Completion Report
 Mississippi Department of Environmental Quality
 Office of Land and Water Resources
 P.O. Box 2309
 Jackson, MS 39225-2309
 (601)961-5210
 (601) 360-0535 (fax)

County: Madison
 Permit #: 17149
 Driller: Griner Drilling Service, Inc.
 Date completed: 2/17
Copy information from block on Part 1

For Office Use Only:

Well #: U0096
 Aquifer: SPRT

This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part 1 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		
Owner Name: <u>City of Ridgeland</u>			Latitude: <u>32 25 32.12</u> Longitude: <u>90 12.06 12W</u>		
Mailing Address: <u>Post Office Box 217</u>			Method of Lat/Long (check one): Conventional Survey _____, USGS quad <input checked="" type="checkbox"/> , Hand-held GPS _____, Survey-grade GPS _____		
<u>Ridgeland</u>	<u>Mississippi</u>	<u>39157</u>	<u>1/4</u> <u>1/4</u> , Sec <u>28</u> T <u>7N</u> R <u>1E</u>		
City	State	Zip Code	<u>E</u> of <u>Ridgeland</u>		
Telephone No. (601) <u>853-2027</u>			(Distance) (Direction) (Nearest Town)		

Pump Type (circle one)

Submersible **Turbine** Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe): _____

Date Pump Installed: 11/16 Rated Pump Capacity: 775 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: 200 Setting Depth: 530 feet Number of Stages: 11

Pump Test Data for Non Flowing Well

Date Well Tested: 12/28/2016 Duration of Pump Test (minimum 4 hours): 24 hours

Static Water Level (A): 411 Feet Below Land Surface Pumping Water Level (B): 482 Feet **Below** Land Surface

Drawdown [(B) - (A)]: 71 Feet **Below** Land Surface Test Pumping Rate: 775 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 yielded 775 GPM with a drawdown of 71 feet after 24 hours of pumping

Meter Installation

Meter Manufacturer: Water Specialties Meter Serial Number: _____

Meter Model Number/Name: ML-04 D Type of Meter: Propeller

Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): 0 - 1,500

Installation Date: 11/16 Meter installed by: Griner Drilling Service, Inc.

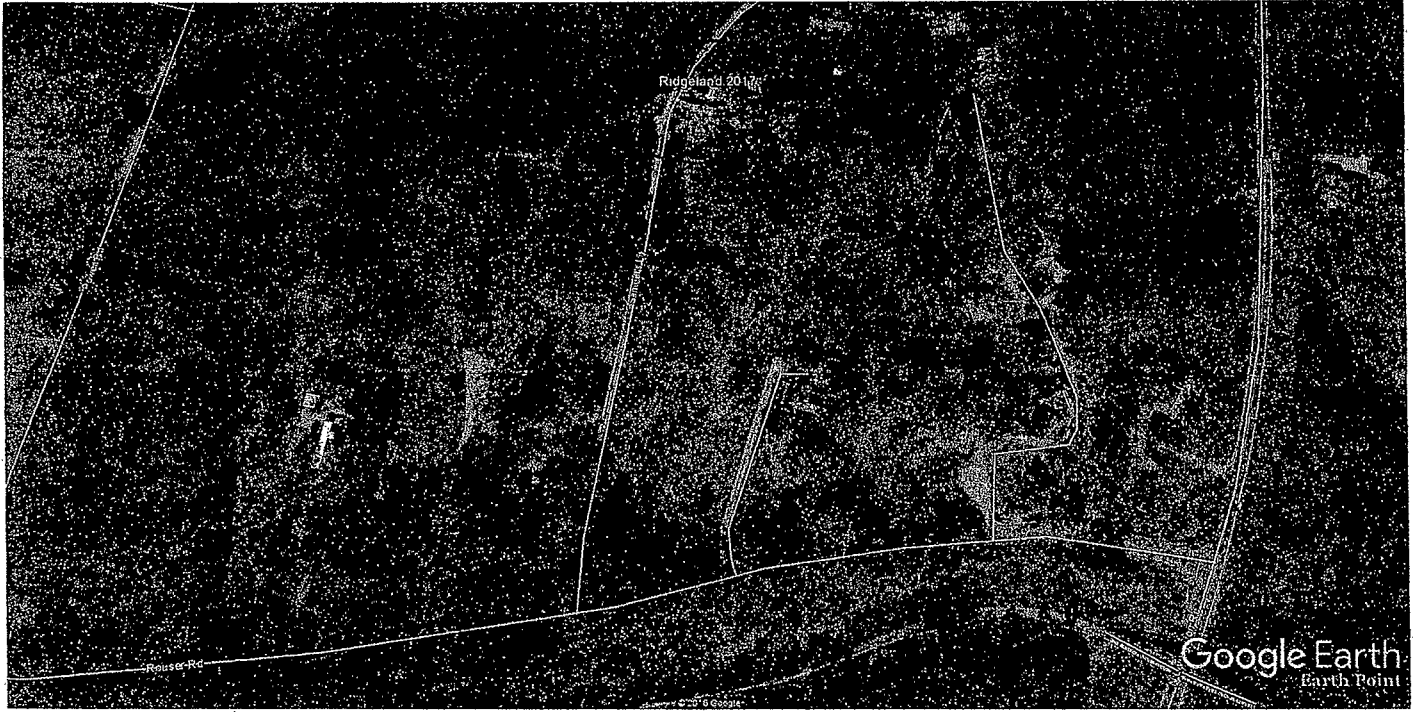
Is This Meter (circle one): **New** Repaired Replacement

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.

RECEIVED
FEB 15 2017

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

Ryan Herndon UNR-00000700 2/14/2017
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer



Google Earth

feet
meters



RECEIVED

FEB 15 2017

BY

(FLORA)



RIDGELAND QUADRANGLE
MISSISSIPPI
TOPOGRAPHIC SERIES

(CANTON)

090° 13' 16.7489" W
032° 26' 55.6476" N

(CHARLTON)

090° 10' 56.5773" W
032° 26' 55.6476" N

(POCAHONTAS)

(MADISON)



032° 24' 08.0450" N
090° 13' 16.7489" W

032° 24' 08.0450" N
090° 10' 56.5773" W

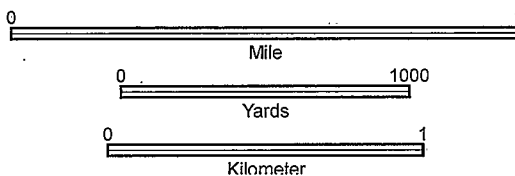
(CLINTON)

(JACKSON SE)

Declination



(JACKSON)
SCALE 1:24000



CONTOUR INTERVAL 10 FT

Produced by Trimble Terrain Navigator Pro
Topography based on USGS 1:24,000
Maps

North American 1983 Datum (NAD83)

To place on the predicted North American
1927 move the projection lines 16M N and
8M W

32090-C2-TM-024
RIDGELAND, MS
JAN 1, 1998