County: Pearl Riv	/er
Permit #: MS-GW-	
Driller: Griner Drillin	g Service, Inc.
Date drilling completed:	11/25/09

State Well Report

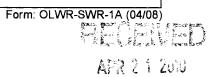
Part 1 - Driller's Log

Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 2309 Jackson, MS 39225 (601)961-5210 (601)961-5228 (fax)

For Office Use Onl Aquifer: \(\sum \int 0 \)	y: 9
Well #:	
L. S. Elevation:	
E-log #:	

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 comp	oletion of drilling of the well or borehole.				
Information on Well Owner	Well or Borehole Location				
(Landowner if borehole is not for a water well)	Latitude: 30° 55' 03.66" N Longitude: 89° 26' 24.88" W				
Owner Name Pearl River County Utility Authority					
Mailing Address: 925 Goodyear Blvd.	Method of Lat/Long (check one): Conventional Survey				
	USGS quad O Hand-held GPS O Survey-grade GPS O				
Picayune MS 39466	SE 1/4 NE 1/4 Sec 36 Twn 1S Rng 15W				
City State Zip Code	Distance Direction Nearest Town				
Telephone No. ()	8MilesNE ofpoplarville				
Well / Bore	hole Data				
Date drilling started: 02-04-09 Date drilling completed: 11/25/	09 Hole depth: 1302' Hole diameter: 7-7/8"				
Location of the source of any surface water used for drilling: Method of dosing and volume of Chlorine used in drilling and development.	opment:				
Logs run (check all applicable): None Electric Gamma Ray Name of organization running log(s):	Density Sonic Neutron Other:				
Purpose of borehole (check one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump					
Seismic Survey Other (describe) If drilling is not related to water well construction, skip the remainder of this block					
Purpose of Well (check one): Home OIndustrial Public Supply Irrigation OFish Culture OOther:					
If a flowing well, method of flow regulation: Valve Other (describe)					
Static Water Level: 111 feet above or below land surface Date measured: 11/25/09					
Method of Measurement (check one) steel tape electric tape air line other:					
Well depth: 300' Well grouted to a depth of 250 feet Type of grout (check one): Neat Cement Bentonite OMix					
Casing length: 250 feet Casing diameter: 16	inches Type of casing: Steel A-53B				
Screen length: 60 feet Screen diameter: 10					
Screen slot size: .020 inches Setting depth: From 2	60 feet to 330 feet				
Type of completion (check 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 next page					





The sketch below only required for water wells

Well drawing attached

Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth)	To (depth)
Clay	Ground Level	31.60
Clay	31.60	63.13
Sand and Clay	63.13	94.13
Clay and Sand	94.13	125.40
Sand and Gravel	125.40	156.76
Sand and Clay	156.76	188.39
Clay and Sand	188.39	219.85
Clay and Sand	219.85	251.55
Sand	251.55	282.55
Sand	282.55	314.15
Sand and Clay	314.15	343.57
Sand and Clay	343.57	374.72
Clay and Sand	374.72	406.37
Steaked	406.37	437.84

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 structure aid in locating the well; 3) any roads, power lines, or other items that may aid in locating 4) a north arrow.	res on the property that may ing the property and the well;
see attached	
Landowner Name:	Form: OLWR-SWR-1A (04/08)

I certify that the well/borehole was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state

Charles H. Griner, Sr. 0-184

03/24/10

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee

AFK 2 1 COW



County: Pearl River Permit #: MS-GW-16558 Driller: Griner Drilling Service, Inc. Date completed: 11/25/09

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
(601)961-5210

Aquifer: D (O 9
Well #:
Elevation:

(601)961-5228 (fax) Copy information from block on Part 1 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 Owner Name: Pearl River County Utility Authority Latitude: 30° 55′ 03.66″ N Longitude: 89° 26′ 24.88″ W Mailing Address: 925 Goodyear Blvd. Method of Lat/Long (check one): Conventional Survey USGS quad . Hand-held GPS . Survey-grade GPS Picayune MS 39466 State Zip Code Distance Direction Nearest Town Telephone No. (Miles NE of Poplarville **Pump Type Power Type** Check one Check one Air Lift (Submersible Diesel Engine Natural Gas Jet (Gasoline Engine Bucket (Turbine (Tractor PTO Piston (Electric Motor Hand (Flowing Well Centrifugal (Rotary (Windmill () Other (specify): Horse Power Rating of Motor: 40 Other (specify): N/A Setting Depth: 180' Top Of Bowls Date Pump Installed: 09/29/09 feet Rated Pump Capacity: 500 Number of Stages: 4 Gallons Per Minute Pump Test Data Method of Measuring Water Level Date Well Tested: 11/25/09 Check one Electric Measuring Line Steel Tape Air Line (Static Water Level (A): 111 Feet Below Land Surface Other (specify): Pumping Water Level (B): 135 Feet Below Land Surface For flowing well, measured shut in head: N/A Drawdown [(B) - (A)]: 24 Feet Below Land Surface Test Pumping Rate: 554 Gallons Per Minute Well vielded GPM with a drawdown of Duration of Pump Test (minimum 4 hours): 7 hours of pumping feet after

This is for (check one):	New Well 💽	Replacement of Existing Pump	Repair of	Existing Pump O	

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

Charles H. Griner Sr.

0-184

Print Name of Pump Installer and License No. (if applicable)

Signature of Pump Installer

Form: OLWR-SWR-1C (07-09)



