

# 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 #: J-135  
L. S. Elevation: \_\_\_\_\_  
E-log #: \_\_\_\_\_

County: Pike  
Permit #: \_\_\_\_\_  
Driller: GREENN WATER WELL & SUPPLY, INC.  
Date drilling completed: 3/30/07

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			Well Location		
Owner Name: <u>Judy Davis</u>	Latitude: <u>31° 9' 50.8" N</u>	Longitude: <u>90° 20' 24.6" W</u>			
Mailing Address: <u>9033 Old Hwy 24</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>				
	USGS quad, <u>Hand-held GPS</u> , <u>Survey-grade GPS</u>				
<u>Magnolia MS 39652</u>	<u>SW 1/4 SW 1/4 Sec 6 Twn 20 N Rng 9 E</u>				
City State Zip Code	Distance: <u>6</u> Miles	Direction: <u>E</u>	Nearest Town: <u>Magnolia</u>		
Telephone No. <u>(601) 783-2473</u>					

Well Data

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

Date well drilling started: 3/30/07 Date well drilling completed: 3/30/07

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

Static Water Level: 115 feet above below (circle one) land surface Date measured: 3/30/07

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

Hole depth: 182 Well depth: 170 Well grouted to a depth of 10 feet

Type of grout (circle one): Cement Bentonite Mix

Casing length: 160 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 160 feet to 170 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.

GREENN WATER WELL & SUPPLY, INC.  
Brian McClendon, lic. no. 0-664

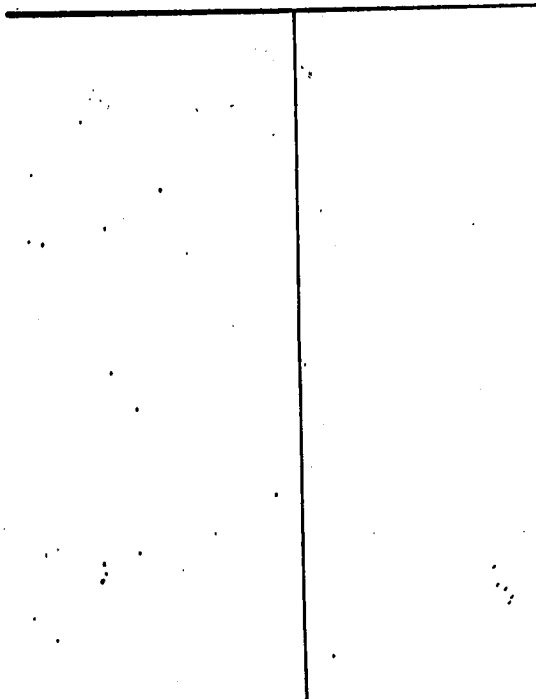
Print Name of Water Well Contractor and License No. \_\_\_\_\_

Brian McClendon  
Signature of Water Well Contractor

If well telescopes please sketch below and show depths.

J-135

Ground Level



Description of Formations Encountered	From	To
red clay	0	18
sand & gravel	18	76
white clay	76	80
gravel	80	179
red clay	179	182

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.

The sketch shows a vertical line on the left labeled "road" with an arrow pointing upwards. A diagonal line labeled "drive" branches off from the road. To the right of the driveway, there is a square labeled "home" and another square labeled "shed". An "x" labeled "well" is marked near the driveway.

Landowner Name: Judy Davis

Brian McClendon, lic. no. 0-664  
GRENN WATER WELL & SUPPLY, INC.

Brian McClendon  
Signature of Water Well Contractor

# 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: Pike  
Permit #: \_\_\_\_\_  
Driller: GRENN WATER WELL & SUPPLY, INC.  
Date completed: 3/30/07

**For Office Use Only:**

Aquifer: \_\_\_\_\_  
Well #: J-135  
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>Judy Davis</u>	Latitude: <u>31° 9' 50.8"</u> Longitude: <u>90° 20' 24.6"</u>
Mailing Address: <u>9033 Old Hwy 24</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>
<u>Magnolia MS 39652</u>	USGS quad, <u>Hand-held GPS</u> Survey-grade GPS
City State Zip Code	<u>SW 1/4 SW 1/4 Sec 6 Twn 2 N Rng 7 E</u>
Telephone No. <u>(601) 783-7473</u>	Distance Direction Nearest Town
	<u>6</u> Miles <u>E</u> of <u>Magnolia</u>

Pump Type Circle one	Power Type Circle one
Air Lift Jet <input type="radio"/> <u>Submersible</u> <input checked="" type="radio"/>	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston Turbine	<u>Electric Motor</u> <input checked="" type="radio"/> Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify): _____
Other (specify): _____	Horse Power Rating of Motor: <u>3/4</u>
Date Pump Installed: <u>3/30/07</u>	Setting Depth: <u>135</u> feet
Rated Pump Capacity: <u>34</u> Gallons Per Minute	Number of Stages: <u>12</u>

Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested: <u>3/30/07</u>	Air Line <input type="radio"/> <u>Electric Measuring Line</u> <input checked="" type="radio"/> Steel Tape
Static Water Level (A): <u>115</u> Feet Below Land Surface	Other (specify): _____
Pumping Water Level (B): <u>121</u> Feet Below Land Surface	For flowing well, measured shut in head: _____ feet
Drawdown [(B) - (A)]: <u>6</u> Feet Below Land Surface	Well yielded <u>13</u> GPM with a drawdown of
Test Pumping Rate: <u>13</u> Gallons Per Minute	<u>6</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.  
William Hardin, lic. no. 0-717P  
Print Name of Pump Installer and License No. (if applicable)

William Hardin  
Signature of Pump Installer