

State Well Report

Part I - 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)

County: Smith
Permit #: MS-6W-16581
Driller: Griner Drilling Service
Date drilling completed: 1-09-09

For Office Use Only:
Aquifer:
Well #: R104 Q67
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 completion of drilling of the well or borehole.

Information on Well Owner (Landowner if borehole is not for a water well)
Owner Name: Town of Taylorsville
Mailing Address: Post Office Box 358
Taylorsville MS 39168
City State Zip Code
Telephone No. (601) 785-6531
50 Well or Borehole Location
Latitude: 31 40' 56.88" N 00.1 Longitude: 89 27' 02.02" W
Method of Lat/Long (check one): Conventional Survey
USGS quad Hand-held GPS Survey-grade GPS
Distance 3 Miles North of Taylorsville

JAM
11-25-14
GPS from
MSDH &
well loc
on aerial
photos -

Well / Borehole Data
Date drilling started: 10-21-08 Date drilling completed: 1-09-09 Hole depth: 300 Hole diameter: 30"
Location of the source of any surface water used for drilling:
Method of dosing and volume of Chlorine used in drilling and development:
Logs run (check all applicable): None Electric Gamma Ray Density Sonic Neutron Other:
Name of organization running log(s): Griner Drilling Service, Inc.
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 Industrial Public Supply Irrigation Fish Culture Other:
If a flowing well, method of flow regulation: Valve Other (describe)
Static Water Level: 137 feet above or below land surface Date measured: 11-13-09
Method of Measurement (check one) steel tape electric tape air line other:
Well depth: 245' Well grouted to a depth of 165' feet Type of grout (check one): Neat Cement Bentonite Mix
Casing length: 165 feet Casing diameter: 16 inches Type of casing: Steel
Screen length: 50' feet Screen diameter: 16 inches Type of screen: Rod Base
Screen slot size: .020 inches Setting depth: From 175 185 feet to 235 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: 0 feet If telescoped or more than one screen, describe on next page

Form: OLWR-SWR-1A (04/08)

MSDH # 0656011-06

County: Smith
 Permit #: GW 16581
 Driller: Griner Drilling Service, Inc.
 Date completed: 1-09-09
Copy information from block on Part 1

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
 (601)961-5228 (fax)

For Office Use Only:
 Aquifer: _____
 Well #: R104 Q-67
 Elevation: _____

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>Town of Taylorsville</u>		Latitude: <u>31 48 50.1</u> ^{50 00.1} 56.88 N	Longitude: <u>89 27 11.2</u> 62.12 W
Mailing Address: <u>Post Office Box 358</u>		Method of Lat/Long (check one): Conventional Survey <input type="radio"/>	
<u>Taylorsville MS 39168</u>		USGS quad <input type="radio"/> Hand-held GPS <input checked="" type="radio"/> Survey-grade GPS <input type="radio"/>	
City	State	Zip Code	<u>NE 1/4 SE 1/4 Sec 18 13 T 10N R 14W</u>
Telephone No. <u>(601) 785-6531</u>		Distance <u>3</u> Miles	Direction <u>North</u> of Nearest Town <u>Taylorsville</u>

Pump Type Check one			Power Type Check one		
Air Lift <input type="radio"/>	Jet <input type="radio"/>	Submersible <input type="radio"/>	Diesel Engine <input type="radio"/>	Gasoline Engine <input type="radio"/>	Natural Gas <input type="radio"/>
Bucket <input type="radio"/>	Piston <input type="radio"/>	Turbine <input checked="" type="radio"/>	Electric Motor <input checked="" type="radio"/>	Hand <input type="radio"/>	Tractor PTO <input type="radio"/>
Centrifugal <input type="radio"/>	Rotary <input type="radio"/>	Flowing Well <input type="radio"/>	Windmill <input type="radio"/>	Other (specify): _____	
Other (specify): _____			Horse Power Rating of Motor: <u>75</u>		
Date Pump Installed: <u>10-01-09</u>			Setting Depth: <u>240</u> feet		
Rated Pump Capacity: <u>500</u> Gallons Per Minute			Number of Stages: <u>3</u>		

Pump Test Data		Method of Measuring Water Level Check one	
Date Well Tested: <u>1-19-09</u>		Air Line <input type="radio"/>	Electric Measuring Line <input checked="" type="radio"/>
Static Water Level (A): <u>136.82</u> Feet Below Land Surface		Steel Tape <input type="radio"/>	
Pumping Water Level (B): <u>191.88</u> Feet Below Land Surface		Other (specify): _____	
Drawdown [(B) - (A)]: <u>55.06</u> Feet Below Land Surface		For flowing well, measured shut in head: _____ feet	
Test Pumping Rate: <u>503</u> Gallons Per Minute		Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping	
Duration of Pump Test (minimum 4 hours): <u>24</u> hours			

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

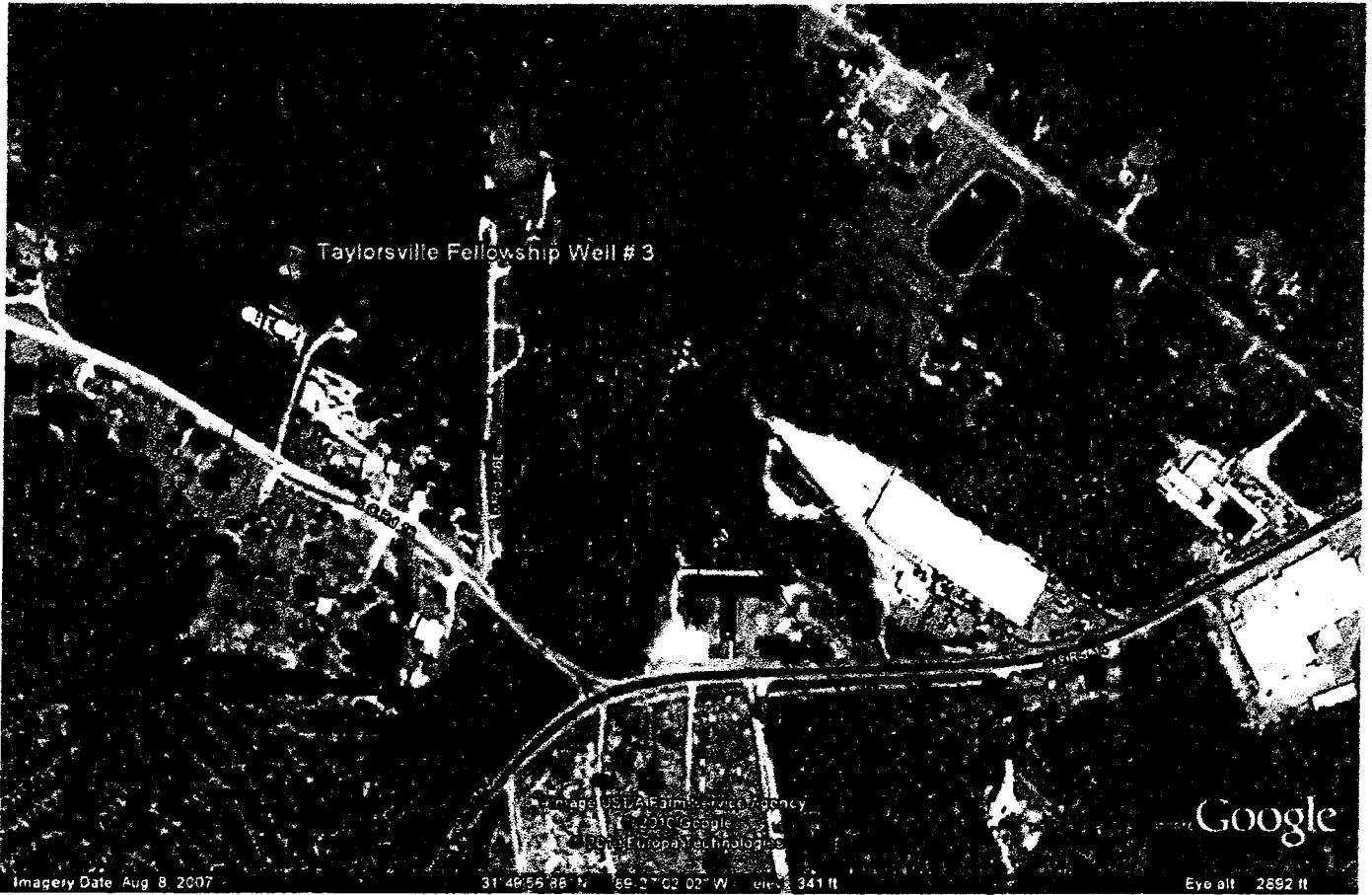
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

Charles H. Griner Sr. 0-184
 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer

FW 16581

Smith Co

~~R104~~ P-67



Section 18 T10N R14W

Well located in the point
on the map. It is

Elev 340

Lat 31-50-00.1

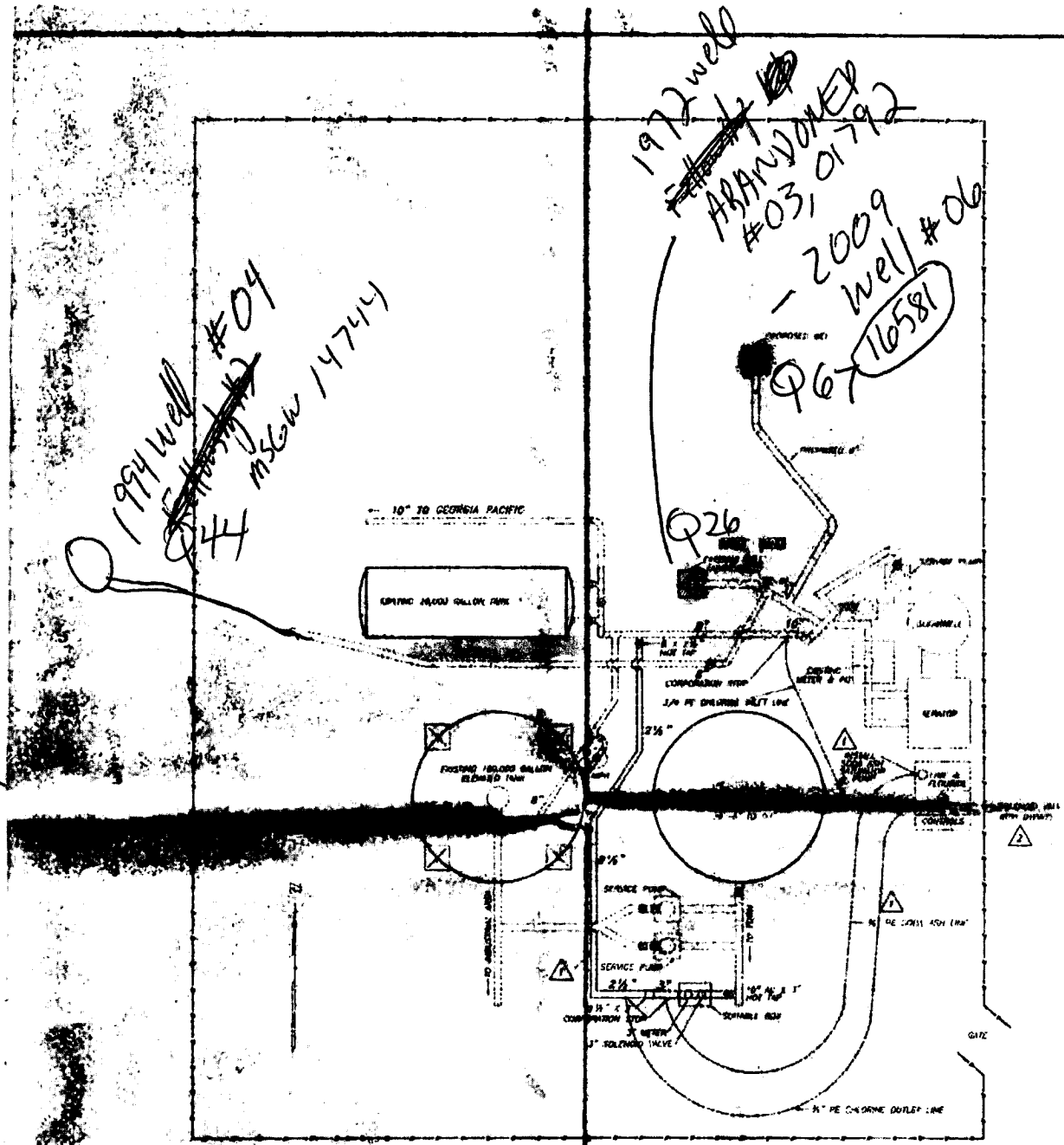
Long 89-27-11.4

MSDIT lat/long
of completed well.
Can see on newest
aerial photos. *JM*
North of
Elev Tank 11-25-14

NOT TO SCALE

1994 well #04
~~MSW 14744~~
 044

1972 well
~~ARRANGED~~
 #03, 01792
 - 2009 well #06
 16581



**EXISTING WELL, PLANT & TANK SITE
 FELLOWSHIP AREA**

NOT TO SCALE
 DRAWING IS FOR REFERENCED USE ONLY



AS BUILT

- CHANGE ORDER NO. 1**
- 1. ALL WORK IS TO BE FIELD LOCATED BY THE ENGINEER.
 - 2. 2" SOLID VALVE TO BE OLD-VAL 136-01.
 - 3. PUMP - EXPANDED TO OPEN
 - 4. SOLID VALVE TO BE FIELD LOCATED TO OPEN SOLID VALVE FROM EVERY FIFTH TO LAST TURN. (SEE NOTE 1) FOR WATER.
 - 5. SOLID VALVE TO BE FIELD LOCATED TO OPEN SOLID VALVE FROM EVERY FIFTH TO LAST TURN. (SEE NOTE 1) FOR WATER.
 - 6. SOLID VALVE TO BE FIELD LOCATED TO OPEN SOLID VALVE FROM EVERY FIFTH TO LAST TURN. (SEE NOTE 1) FOR WATER.
 - 7. SOLID VALVE TO BE FIELD LOCATED TO OPEN SOLID VALVE FROM EVERY FIFTH TO LAST TURN. (SEE NOTE 1) FOR WATER.
- CHANGE ORDER NO. 2 ADD CHLORINATION**

TOWN OF TAYLORSVILLE, MISSISSIPPI	
WATER WELL AND APPURTENAN PLANS	
CHANGE ORDER NO. 1 DETAILS	
HEFLIN ENGINEERING	
P.O. BOX 42 TAYLORSVILLE, MISSISSIPPI 39043	
DATE: 7/1/01	SCALE: 1/4" = 1'-0"
DESIGNED BY: H.E.H.	CHECKED BY: H.E.H.
DRAWN BY: H.E.H.	DATE: 7/1/01