

PWS ~~0660024-01~~ 0660024-01

County: Stone 131
 Permit # GW-16186
 Driller: Griner Drilling Service, Inc.
 Date drilling completed: 4/24/2006

Well Driller Report and Well Log

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 #: C-180
 L.S. Elevation: _____
 E-Log #: _____

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.

BIG LEVEL well

30.833583
-89.044056

Well Owner Information		Well Location	
Owner Name: <u>Carnes Utility Association #2</u>		Latitude: <u>30.833583</u>	Longitude: <u>89.044056</u>
Mailing Address: _____		Method of Lat/Long (circle one): <u>Conventional Survey</u>	
<u>1276 Carnes Road</u>		USGS quad, Hand-held GPS, Survey-grade GPS	
<u>Lumberton MS 39455</u>		<u>NW 1/4 NE 1/4 Sec 36 Twn 02S Rng 11 West</u>	
City State Zip Code		Distance _____ Miles	Direction _____ of Nearest Town _____
Telephone No. <u>(601) 928-5918</u>			

Well Data

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

Date well drilling started: 12/20/2005 Date well drilling completed: 04/24/06

If flowing, method of flow regulation: _____ Other (describe) _____

Static Water Level: 172 feet above or (below) (circle one) land surface Date measured: 04/24/06

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

Hole depth: 925 Well depth: 915 Well grouted to a depth of 845 feet

Type of grout (circle one): Cement Bentonite (Mix)

Casing length: 845 feet Casing diameter: 12 inches Type of casing: Steel

Screen length: 60 feet Screen diameter: 8 inches Type of screen: Rod Base

Screen slot size: 0.020 inches Setting depth: From 855 feet to 915 feet

Type of completion (circle all applicable): (Gravel packed) (Underscreened) Telescoped Open hole Natural development

Other (describe): _____

Top of lap pipe or reduction in casing: 775 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): Griner Drilling Service, Inc.

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.

Griner Drilling Service, Inc. 0-581
 Print Name of Water Well Contractor and License No. _____

Signature of Water Well Contractor _____

Received

If well telescopes please sketch below and show depths

SEP 08 2016

11648

BY OLWR

STATE WELL REPORT

Part 2

Pump Installer's Completion Report

County: <u>Stone</u>
Permit # <u>GW-16186</u>
Driller: <u>Griner Drilling Service</u>
Date Completed: <u>8/26/2008</u>

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 #:	<u>C-180</u>
Elevation:	

This report must be prepared by the pump installer in detail and filed with the Department with 30 days of the installation of pump. A copy of Part 1 of this report must be attached to the report.

Well Owner Information		Well Location	
Owner Name <u>Carnes Utility Association</u>	Latitude: <u>30</u> <u>50</u> <u>01</u>	Longitude: <u>89</u> <u>02</u> <u>39</u>	
Mailing Address: <u>1276 Carnes Road</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS		
<u>Lumberton</u> MS <u>39455</u>	<u>NW</u> 1/4 <u>NE</u> 1/4 Sec <u>36</u> Twn <u>02</u> South Rng <u>11</u> West	Distance _____ Miles	Direction _____ of
City State Zip Code			Nearest Town _____
Telephone No. <u>(601) 928-5918</u>			

Pump Type Circle one			Power Type Circle one		
Air Lift	Jet	Submersible	Diesel Engine	Gasoline Engine	Natural Gas
Bucket	Piton	(Turbine)	(Electric Motor)	Hand	Tractor PTO
Centrifugal	Rotary	Flowing Well	Windmill	Other (specify): _____	
Other (specify): _____			Horse Power Rating of Motor: <u>100</u>		
Date Pump Installed: <u>8/19/2006</u>			Setting Depth: <u>250</u> feet		
Rated Pump Capacity: <u>700</u> Gallons per minute			Number of Stages: <u>6</u>		

Pump Test Data		Method of Measuring Water Level Circle One	
Date Well Tested: <u>4/24/2006</u>		Air Line (Electric Measuring Line)	Steel Tape
Static Water Level (A): <u>172</u> Feet Below Land Surface		Other (specify): _____	
Pumping Water Level (B) <u>191.37</u> Feet Below Land Surface		For flowing well, measured shut in head _____ feet	
Drawdown ((B) - (A)) : <u>19.37</u> Feet Below Land Surface		Well yielded <u>703</u> GPM with a drawdown of	
Test Pumping Rate: <u>703</u> Gallons Per Minute		<u>19.37</u> feet after <u>24</u> hours of pumping	
Duration of Pump test (minimum 4 hours) : <u>24</u> hours			

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

Griner Drilling Service, Inc. 0-581
Print Name of Pump Installer and License No. (if applicable) _____ Signature of Pump Installer _____

Received
SEP 08 2008
BY OLWR