

# 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)961-5555  
(601)961-5228 (fax)

### For Office Use Only:

Well #: U67  
Aquifer: \_\_\_\_\_  
E-Log #: \_\_\_\_\_

County: Lauderdale  
Permit #: MS-6W-17423  
Driller: Packets Paks  
Date drilling completed: 1/20/20

*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>LONG CREEK WATER ASSN</u>	Latitude: <u>32.1739945</u> Longitude: <u>88.4961696</u>
Mailing Address: <u>4695 Long Creek Water Rd. Meridian, MS 39301</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
City _____ State _____ Zip Code _____	<u>SE</u> ¼ <u>NW</u> ¼, Sec <u>18</u> T <u>05N</u> R <u>18E</u>
Telephone No. <u>(601) 693-3096</u>	<u>11</u> Miles <u>SE</u> of <u>MERIDIAN</u> (Distance) (Direction) (Nearest Town)

Well / Borehole Data
Date drilling started: <u>5/19/19</u> Date drilling completed: <u>1/20/20</u> Hole depth: <u>950</u> Hole diameter: <u>12" x 8"</u>
Location of the source of any surface water used for drilling: _____
Method of dosing and volume of Chlorine used in drilling and development: <u>5 PPM</u>
Logs run (check all applicable): <input type="checkbox"/> log run <input checked="" type="checkbox"/> Electric <input checked="" type="checkbox"/> Gamma Ray <input type="checkbox"/> Density <input type="checkbox"/> Sonic <input type="checkbox"/> Neutron Other: _____
Name of organization running log(s): <u>STATE</u>
Purpose of borehole (check one): Water Well <input checked="" type="checkbox"/> Geotechnical/Geological Investigation <input type="checkbox"/> Ground Source Heat Pump <input type="checkbox"/> <input type="checkbox"/> Seismic Survey Other (describe) _____
<i>If drilling is not related to water well construction, skip the remainder of this block</i>
Purpose of Well (check all applicable): <input type="checkbox"/> Home <input type="checkbox"/> Industrial <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>339</u> feet <input type="checkbox"/> above or <input checked="" type="checkbox"/> below land surface Date measured: <u>6/6/19</u> (check one)
Method of measurement (check one) <input type="checkbox"/> Steel tape <input checked="" type="checkbox"/> Electric tape <input type="checkbox"/> Air line <input type="checkbox"/> Other (describe): _____
Well depth: <u>950</u> Well grouted to a depth of: <u>840</u> feet Type of grout (check one) <input checked="" type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Mix
Casing length: <u>840</u> feet Casing diameter: <u>12</u> inches Type of casing: <u>Steel</u>
Screen length: <u>70</u> feet Screen diameter: <u>8</u> inches Type of screen: <u>Stainless</u>
Screen slot size: <u>.016</u> inches Setting depth: From <u>850-880</u> feet to <u>920-950</u> feet
Type of completion (check all applicable) <input type="checkbox"/> gravel packed <input checked="" type="checkbox"/> Underreamed <input type="checkbox"/> Open hole <input type="checkbox"/> Natural Development Other (describe): _____
Top of lap pipe or reduction in casing: <u>790</u> feet
<i>If telescoped or more than one screen, describe on next page</i>

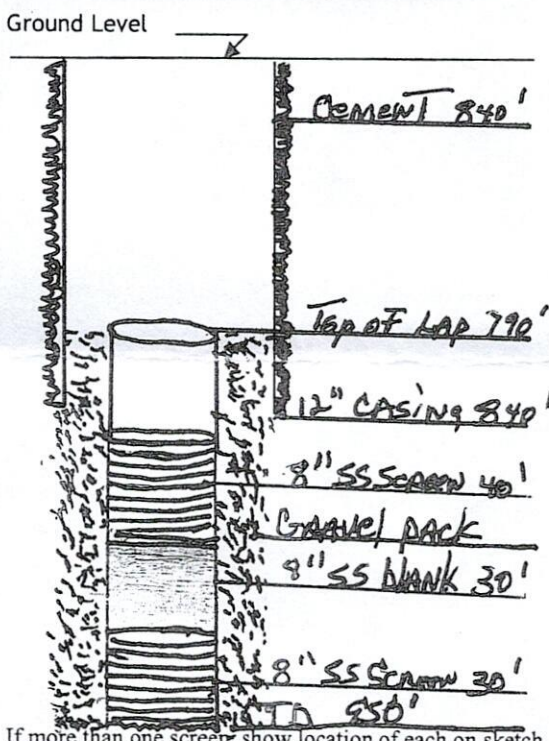
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BY OLWR



County: Lauderdale  
 Permit #: \_\_\_\_\_

For Office Use Only:  
 Well #: U67

The sketch below only required for water wells  
If well telescopes, show depths on sketch.



If more than one screen, show location of each on sketch

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)	
	Ground level	
SAND	0	58
CLAY	58	380
CLAY + SAND	380	804
SAND	804	950

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) north arrow

*Attached*

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Landowner Name: Long Creek Water Assn

I HEREBY 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 laws.

Rayburn Parks 0414      5/4/2020      Rayburn Parks  
 Print Name of Responsible Licensee and License No.      Date      Signature of Licensee



# 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)

### For Office Use Only:

Well #: 467  
 Aquifer: \_\_\_\_\_

County: Lauderdale  
 Permit #: \_\_\_\_\_  
 Driller: Parks + Parks  
 Date completed: 1/20/20  
*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	Well Location
Owner Name: <u>Long Creek Water Assn</u>	Latitude: <u>32.2789945</u> Longitude: <u>88.4961696</u>
Mailing Address: <u>4695 Long Creek Water Rd</u> <u>Meridian, MS 39301</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
City _____ State _____ Zip Code _____	_____ 1/4 _____ 1/4, Sec _____ T _____ R _____
Telephone No. <u>(601) 693-3096</u>	<u>11</u> Miles <u>SE</u> of <u>Meridian MS</u> (Distance) (Direction) (Nearest Town)

**Pump Type (check one)**

Submersible  Turbine  Air Lift  Centrifugal  Flowing Well  Jet  Piston  Rotary  Other (describe): \_\_\_\_\_

Date Pump Installed: 1/20/20 Rated Pump Capacity: 400 Gallons Per Minute

Is This Pump (check one):  New  Repaired  Replacement

**Power Type (check one)**

Electric  Diesel  Gasoline  Natural Gas  Tractor PTO  Windmill  Other (describe): \_\_\_\_\_

Horse Power Rating of Motor: 75 Setting Depth: 470 feet Number of Stages: 12

**Pump Test Data for Non Flowing Well**

Date Well Tested: 2/20/20 Duration of Pump Test (minimum 4 hours): 8 hours

Static Water Level (A): 339 Feet Below Land Surface Pumping Water Level (B): 410 Feet Below Land Surface

Drawdown [(B) - (A)]: 70 Feet Below Land Surface Test Pumping Rate: 400 Gallons Per Minute

Method of measurement (check one): Steel tape  Electric tape  Air line  Other (describe): \_\_\_\_\_

**Pump Test Data for Flowing Well**

Measured shut in head: 566 feet.

Well yielded 400 GPM with a drawdown of 70' feet after 8 hours of pumping

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**Meter Installation**

Meter Manufacturer: Water Specialties Meter Serial Number: \_\_\_\_\_

Meter Model Number/Name: MLO4 Type of Meter: Propeller

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

Installation Date: 2/4/2020 Meter installed by: DARRELL CRAWFORD

Is This Meter (check 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.*

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

Rayburn Parks 0414 5/4/2020 Rayburn Parks  
 Print Name of Pump Installer and License No. (if applicable) Date Signature of Pump Installer



# LONG CREEK WATER

32.2789945

88.4961696

NEW WELL

## Legend

NEW WELL

Water Valley Rd

James Jay Rd

Google Earth

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500 ft

