State W	ell Report		
	art 1	For Office Use Only:	
Mississippi Department	t of Environmental Quality	Aquifor:	
	nd Water Resources	Well #: <u>D-19</u>	
Driller: GREINI WATER WELL &	P.O. Box 10631  Jackson, MS 39289-0631		
	961-5210	L. S. Elevation:	
(601)354-6938 (fax)		B-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.			
Well Owner Information	Well	Location	
Owner Name Phillip Longwell	Latitude: 31 • 37 · 52	" Longitude: 90 • 20 • 8 44.	
Mailing Address: 13847 Hwy 23	Method of Lat/Long (circle or	ne): Conventional Survey,	
	USGS quad, Hand-held	GPS Survey-grade GPS	
Belle Chasse LA 70037 City State Zip Code	SEUSEU Sec_L	3 Twn SN Rng 8E	
City State Zip Code	Distance Direction	Nearest Town	
Telephone No. (504) 656 - 7475	Miles Direction	of Wesson	
Well Data			
Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other: Hunting Camp			
Purpose of Well (circle one) Home Industrial Public Supply	Irrigation Fish Culture	Uner: HUNTING CUMP	
Date well drilling started: 1/4/05 Date well drilling completed: 1/4/05			
If flowing, method of flow regulation: Valve Other (describe)			
Static Water Level:			
Method of Measurement (circle one) steel tape electric tape air line other:			
Hole depth: 283 Well depth: 272 Well grouted to a depth of 10 feet			
Type of grout (circle one): Cement Bentonite Mix			
Casing length: 263 feet Casing diameter: 4 inches Type of casing: PVC			
Screen length: 10 feet Screen diameter: 4 inches Type of screen: PVC			
Screen slot size:			
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.			
GRENN WATER WELL & SUPPLY, INC.	Q '	Midaila	
Brian McClendon, lic. no. 0-664	Drian	W/ >Ulled	
Print Name of Water Well Contractor and License No.	Signature o	of Water Well Contractor	

Here to Value

Description of Formations Encountered	Prom_	To_
red cay	0	10
Streaky	10	55
hlue clay	_ 55	732
Fine sand	155	165
blue cler	165	20
Sand	250	273
Sand blue clay	278	283
		1
		1
		-
		<b> </b>
		<b> </b>
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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 p	ermanent 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.	<b>\$</b>

lodge drive

Landowner Name: Millip Long Well

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

Signature of Water Well Contractor

## STATE WELL REPORT

Lincoln **Pump Installer's Completion Report** County: Mississippi Department of Environmental Quality Permit #: Office of Land and Water Resources P.O. Box 10631 SUPPLY,

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

For Office Use Only:	
Aquifer:	
Well #:	19
Elevation:	

Driller: GRENN WATER WELL & Jackson, MS 39289-0631 (601)961-5210 Date completed: (601)354-6938 (fax) 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 Lonowell \_ Longitude; 90 Owner Name: Method of Lat/Long (circle one): Conventional Survey, Mailing Address: USGS quad Hand-held GPS, Survey-grade GPS Belle Chare La
City State SE 4 SE 4 Sec 13 Twn &N Rng &E Distance Direction Nearest Town SE of Wesson Telephone No. (504) 656 - 74 75 **Pump Type** Power Type Circle one Circle one Air Lift Jet Submersible Diesel Engine Gasoline Engine **Natural Gas** Bucket Piston Turbine Electric Motor Hand Tractor PTO Centrifugal Rotary Flowing Well Windmill Other (specify): Other (specify): \_ Horse Power Rating of Motor: \_ 195 Setting Depth: \_ 21 Rated Pump Capacity: \_ Gallons Per Minute Number of Stages: \_ Pump Test Data Method of Measuring Water Level Circle one Date Well Tested: \_\_\_\_\_\_\_ Air Line Electric Measuring Line Steel Tape Static Water Level (A): 165 \_\_Feet Below Land Surface Other (specify): Pumping Water Level (B): 171 Feet Below Land Surface Drawdown [(B) - (A)]:\_ Feet Below Land Surface For flowing well, measured shut in head: \_ i3. Test Pumping Rate: \_\_\_\_ Gallons Per Minute Well yielded \_\_\_ GPM with a drawdown of Duration of Pump Test (minimum 4 hours): \_\_\_ feet after \_hours of pumping 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

RECEIVED

Signature of Pump Installer

DEC 0.5 2005

BY: OLWR