

# 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)961-5210  
(601)360-0535 (fax)

#### For Office Use Only:

Well #: 0119  
Aquifer: \_\_\_\_\_  
E-Log #: \_\_\_\_\_

County: Lincoln  
Permit #: \_\_\_\_\_  
Driller: GRENN WATER WELL & SUPPLY, INC.  
Date drilling completed: 2-7-14

*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>Francis Case</u>	Latitude: <u>31° 25.324'</u> Longitude: <u>90° 36.896'</u> <u>31° 25' 15.6"</u> <u>90° 37' 15.6"</u>
Mailing Address: <u>2295 Bogue Chitto Rd SW</u>	Method of Lat/Long (check one): <input type="checkbox"/> Conventional Survey <input checked="" type="checkbox"/> Hand-held GPS <input type="checkbox"/> Survey-grade GPS
<u>Smithdale MS 39664</u>	USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> Survey-grade GPS _____
City State Zip Code	<u>NW 1/4 NE 1/4 Sec 98 T6N R6E SE</u>
Telephone No. <u>(601) 734-2373</u>	<u>9</u> Miles <u>SW</u> of <u>Bogue Chitto</u> (Distance) (Direction) (Nearest Town)

Well / Borehole Data
Date drilling started: <u>2-7-14</u> Date drilling completed: <u>2-7-14</u> Hole depth: <u>134</u> Hole diameter: <u>7"</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>Mud Pit Gravel Pack</u>
Logs run (circle all applicable): <input checked="" type="checkbox"/> No log run <input type="checkbox"/> Electric <input type="checkbox"/> Gamma Ray <input type="checkbox"/> Density <input type="checkbox"/> Sonic <input type="checkbox"/> Neutron Other: _____
Name of organization running log(s): _____
Purpose of borehole (circle one): <input checked="" type="checkbox"/> Water Well <input type="checkbox"/> Geotechnical/Geological Investigation <input type="checkbox"/> Ground Source Heat Pump
<input type="checkbox"/> Seismic Survey <input type="checkbox"/> Other (describe) _____
<i>If drilling is not related to water well construction, skip the remainder of this block</i>
Purpose of Well (circle all applicable): <input checked="" type="checkbox"/> Home <input type="checkbox"/> Industrial <input type="checkbox"/> Public Supply <input type="checkbox"/> Irrigation <input type="checkbox"/> Fish Culture
Other (describe): _____
If a flowing well, method of flow regulation: Valve <input type="checkbox"/> Other (describe) _____
Static Water Level: <u>62</u> feet [above or <input checked="" type="checkbox"/> below] land surface Date measured: <u>2-7-14</u> (circle one)
Method of measurement (circle one): Steel tape <input checked="" type="checkbox"/> Electric tape <input type="checkbox"/> Air line Other (describe): _____
Well depth: <u>130</u> feet Well grouted to a depth of: <u>10</u> feet Type of grout (circle one): Neat Cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Mix
Casing length: <u>120</u> feet Casing diameter: <u>4</u> inches Type of casing: <u>PVC</u>
Screen length: <u>10</u> feet Screen diameter: <u>4</u> inches Type of screen: <u>PVC</u>
Screen slot size: <u>.010</u> inches Setting depth: From <u>120</u> feet to <u>130</u> feet
Type of completion (circle all applicable): <input checked="" type="checkbox"/> Gravel packed <input type="checkbox"/> Underreamed <input type="checkbox"/> Open hole <input type="checkbox"/> Natural Development
Other (describe): _____
Top of lap pipe or reduction in casing: _____ feet

*If telescoped or more than one screen, describe on next page*

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Form: OLWR-SWR-1A (4/13) 125 2 1 2014

BY: OLWR

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