

P. O. Box 10631  
Jackson, MS 39289-0631  
WATER WELL DRILLERS LOG

COUNTY WELL LOCATED  
**HICORN**

WELL NUMBER **B-3** CODED

PERMIT NUMBER

NAME OF DRILLING FIRM  
**H.B. Priddy**

DATE WELL COMPLETED  
**1-1-1926**

NAME & MAILING ADDRESS OF LANDOWNER  
**G. C. Taylor**

Latitude:  
Longitude:

WELL LOCATION SEC TOWNSHIP RANGE  
**26 18 S 6 E W**

DISTANCE DIRECTION NEAREST TOWN  
Miles of

OTHER LANDMARK

WELL PURPOSE  Home,  Irrigation,  Municipal,  Industrial,  Fish Pond, etc.

**PUMP DATA**

PUMP TYPE (Circle One):  
Submersible, Turbine, Jet, Flowing Well,  
Other (Describe)

POWER TYPE (Circle One):  
Electric, Tractor, Diesel, Gasoline, Butane,  
Other (Describe) H/P

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Flowing Well Schedule</i>		
<b>DO NOT REMOVE ORIGINAL</b>		
Top of Lap Pipe or Reduction in Casing		
FEET	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE	

**WELL DATA**

Well Depth <b>300</b>	Casing Diameter (In.) <b>6 x 4</b>	Casing Length (Ft.)
Type of Casing	Hole Depth	Depth to Static Water Level <b>Flowing</b>

TYPE OF COMPLETION: (Circle One or More)  
Gravel Packed, Underreamed, Telescoped,  
Natural Development,  Open Hole, Other  
(Describe)

WELL GROUTED TO A DEPTH OF FEET  
Type Grout (circle one): Cement, Bentonite, or Mix

**SCREEN DATA**

Diameter - inches	Length - Feet	Slot Size - inches
Screen Type		Depth to Bottom - Feet

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.

Signature of Licensed Driller and License No. **[Signature]**

Date **10/7/03**

Additional Information Required On Back