MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY
Office of Land and Water Resources

P. O. Box 10631
Jackson, MS 39289-0631

WATER WELL DRILLERS LOG

COUNTY WELL LOCATED: Alcorn	
WELL NUMBER: B-5	CODED:
DATE WELL COMPLETED: 1-1-1953	
PERMIT NUMBER:	
NAME OF DRILLING FIRM: Con. F. Fgires	

NAME & MAILING ADDRESS OF LANDOWNER
O. M. JONES
Rt. 1, Corinth, Ms.
Latitude:
Longitude:

WELL LOCATION	SEC	TOWNSHIP	RANGE
NW/SE/SW	34	1S (N/S)	6E (E/W)

DISTANCE _____ Miles DIRECTION _____ NEAREST TOWN _____

OTHER LANDMARK

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

WELL DATA

Well Depth	Casing Diameter (In.)	Casing Length (Ft.)
348	6 x 4	
Type of Casing	**Hole Depth**	**Depth to Static Water Level**

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**	

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

Top of Lap Pipe or Reduction in Casing
FEET

IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

DO NOT REMOVE ORIGINALS

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.

10/7/03
Date

Additional Information Required On Back