

**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<br><b>Covington</b> |       |
| WELL NUMBER<br><b>E 2010</b>            | CODED |
| DATE WELL COMPLETED<br><b>1-15-99</b>   |       |

|   |
|---|
| PERMIT NUMBER<br><b>0-586</b>               |
| NAME OF DRILLING FIRM<br><b>James Wells</b> |
| <b>Water Well Ser.</b>                      |

|  |             |                |           |
|--|-------------|----------------|-----------|
| NAME & MAILING ADDRESS OF LANDOWNER<br><b>Jared Miller</b>   |             |                |           |
| <b>Rt 1 Box 312</b>  |             |                |           |
| <b>Collins, MS 39428</b>   |             |                |           |
| WELL LOCATION  | SEC         | TOWNSHIP       | RANGE     |
|  | <b>36</b>   | <b>8</b>       | <b>17</b> |
| DISTANCE   | DIRECTION   | NEAREST TOWN   |           |
| <b>7</b> Miles   | <b>EAST</b> | <b>Collins</b> |           |
| OTHER LANDMARK   |             |                |           |
| WELL PURPOSE: <input checked="" type="checkbox"/> Home Irrigation, <input type="checkbox"/> Municipal, <input type="checkbox"/> Industrial, <input type="checkbox"/> Fish Pond, etc. |             |                |           |

|   |               |                         |
|---|---------------|-------------------------|
| <b>PUMP DATA</b>  |               |                         |
| PUMP TYPE (Circle One):<br><input checked="" type="checkbox"/> Submersible, <input type="checkbox"/> Turbine, <input type="checkbox"/> Jet, <input type="checkbox"/> Flowing Well,<br>Other (Describe) _____  |               |                         |
| POWER TYPE (Circle One):<br><input checked="" type="checkbox"/> Electric, <input type="checkbox"/> Tractor, <input type="checkbox"/> Diesel, <input type="checkbox"/> Gasoline, <input type="checkbox"/> Butane,<br>Other (Describe) _____ H/P <b>1</b> |               |                         |
| Pump Capacity (GPM)   | No. of Stages | Setting Depth _____ FT. |
| PUMP TEST   |               |                         |
| Well yielded _____ <b>15</b> GPM with<br>a drawdown of _____ ft.<br>after _____ hours of pumping  |               |                         |

|  |                                      |  |
|--|--------------------------------------|--|
| <b>WELL DATA</b>   |                                      |  |
| Well Depth<br><b>85 ft.</b>  | Casing Diameter (In.)<br><b>4 in</b> | Casing Length (Ft.)<br><b>65</b>         |
| Type of Casing<br><b>PVC</b>   | Hole Depth<br><b>85 ft.</b>          | Depth to Static Water Level<br><b>35</b> |
| TYPE OF COMPLETION: (Circle One or More):<br><input checked="" type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped,<br><input type="checkbox"/> Natural Development, <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other<br>(Describe) _____ |                                      |  |
| WELL GROUTED TO A DEPTH OF <b>10</b> FEET<br>Type Grout (circle one): <input checked="" type="checkbox"/> Cement, <input type="checkbox"/> Bentonite, or Mix   |                                      |  |

|  |  |
|--|--|
| <b>LOG DATA</b>  |  |
| TYPE OF LOG RUN (Circle One):<br><input 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,<br>Other (Describe) _____ |  |
| Name of Organization Running Log   |  |

|                                  |  |                                 |
|----------------------------------|--|---------------------------------|
| <b>SCREEN DATA</b>               |  |                                 |
| Diameter - Inches<br><b>4 in</b> | Length - Feet<br><b>20</b>             | Slot Size - Inches<br><b>08</b> |
| Screen Type<br><b>PVC Slot</b>   | Depth to Bottom - Feet<br><b>65-85</b> |                                 |

|  |               |                |              |
|--|---------------|----------------|--------------|
| <b>GEOLOGIC DATA (Office Use Only)</b>   |               |                |              |
| Surface Elev.  | Geologic Unit | Unit Thickness | Depth to Top |
| Subs. SWL  | Date          | Analysis       | Aquifer Test |
| Driller's Remarks  |               |                |              |
| Top of Lap Pipe or Reduction in Casing   |               |                |              |
| FEET <input type="checkbox"/> IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE |               |                |              |

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM      | TO        | FORMATIONS ENCOUNTERED   | FROM | TO |
|---------------------------------------|-----------|-----------|--|------|----|
| <b>Top sand</b>                       | <b>0</b>  | <b>2</b>  | <b>RECEIVED</b><br><br><b>JUN 17 1999</b><br><br><b>Dept of Environmental<br/>Office of Land &amp; Water Resources</b> |      |    |
| <b>clay</b>                           | <b>2</b>  | <b>30</b> |  |      |    |
| <b>sand</b>                           | <b>30</b> | <b>85</b> |  |      |    |
|                                       |           |           |  |      |    |
|                                       |           |           |  |      |    |
|                                       |           |           |  |      |    |
|                                       |           |           |  |      |    |
|                                       |           |           |  |      |    |
|                                       |           |           |  |      |    |
|                                       |           |           |  |      |    |

IF MORE SPACE IS NEEDED, USE BACK