

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 <u>Desoto</u>	
WELL NUMBER <u>J-112</u>	CODED
DATE WELL COMPLETED <u>7-11-03</u>	

PERMIT NUMBER
NAME OF DRILLING FIRM <u>Mason water wells</u>

NAME & MAILING ADDRESS OF LANDOWNER <u>Oak creek village</u> <u>Cox job</u>			
Source <u>Large Lot 4</u> <u>heraldo ms.</u>			
Latitude:			
Longitude:			
WELL LOCATION	SEC	TOWNSHIP	RANGE
	<u>14</u>	<u>3</u> N	<u>9</u> E
DISTANCE	DIRECTION		NEAREST TOWN
<u>2</u> Miles	<u>SE</u>		<u>Eudora</u>
OTHER LANDMARK			
WELL PURPOSE <input checked="" type="radio"/> Irrigation, <input type="radio"/> Municipal, <input type="radio"/> Industrial, <input type="radio"/> 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
<u>clay det.</u>	<u>0</u>	<u>20</u>
<u>red sand</u>	<u>20</u>	<u>40</u>
<u>wht sand mixed with</u> <u>small gravel.</u>	<u>40</u>	<u>50</u>

WELL DATA

Well Depth	Casing Diameter (In.)	Casing Length (Ft.)
<u>50'</u>	<u>4"</u>	<u>20'</u>
Type of Casing	Hole Depth	Depth to Static Water Level
<u>pvc</u>	<u>50'</u>	<u>21'</u>

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

WELL GROUTED TO A DEPTH OF 10 FEET
Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

Diameter - Inches	Length - Feet	Slot Size - Inches
<u>4"</u>	<u>30'</u>	<u>#10</u>
Screen Type	Depth to Bottom - Feet	
<u>pvc</u>	<u>50'</u>	

RECEIVED

OCT 09 2003

BY: OLWF

Top of Lap Pipe or Reduction in Casing

FEET IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

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.

Gow w. Mason 0-620
Signature of Licensed Driller and License No.

10-2-03
Date

Additional Information Required On Back