

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 DESOTO		PERMIT NUMBER
WELL NUMBER 515	CODED	NAME OF DRILLING FIRM SMITH WELL DRILLING + SERVO.
WELL NUMBER K-181		
DATE WELL COMPLETED 6-20-04		

NAME & MAILING ADDRESS OF LANDOWNER
HOWARD HARRIS
Arrow Crest Homes

Latitude:
Longitude:

WELL LOCATION SEC TOWNSHIP RANGE
N12 T-3 N R-8 E

DISTANCE DIRECTION NEAREST TOWN
3 Miles **N/W** of **HEARNING**

OTHER LANDMARK

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

PUMP DATA		
PUMP TYPE (Circle One): <input checked="" type="checkbox"/> Submersible, <input type="checkbox"/> Turbine, <input type="checkbox"/> Jet, <input type="checkbox"/> Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): <input checked="" type="checkbox"/> Electric, <input type="checkbox"/> Tractor, <input type="checkbox"/> Diesel, <input type="checkbox"/> Gasoline, <input type="checkbox"/> Butane, Other (Describe) _____ HIP 3/4		
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
TOP SOIL	0	5
RED CLAY	5	40
RED SAND + GRAVEL	40	60
WHITE CLAY	60	110
WHITE CLAY + SAND	110	160
WHITE SAND	160	185
RECEIVED		
JUL 22 2004		
BY: OLWR		
Top of Lap Pipe or Reduction in Casing		
FEET	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE	

WELL DATA

Well Depth 185	Casing Diameter (In.) 4"	Casing Length (Ft.) 175
Type of Casing PVC	Hole Depth 185	Depth to Static Water Level 90'

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

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

SCREEN DATA

Diameter - Inches 4"	Length - Feet 10	Slot Size - Inches 14 TAPS
Screen Type PVC	Depth to Bottom - Feet 185	

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] **0-645** **7-19-04**
Signature of Licensed Driller and License No. Date

Additional Information Required On Back