

**MISSISSIPPI DEPARTMENT OF NATURAL RESOURCES**  
Bureau of Land and Water Resources

P.O. Box 10631

Jackson, Mississippi 39209

**WATER WELL DRILLERS LOG**

COUNTY WELL LOCATED <i>George</i>	
WELL NUMBER <i>E 2255</i>	CODED
DATE WELL COMPLETED <i>5-30-89</i>	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Pierce Drilling</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Carol Graves</i>		
WELL LOCATION: SEC <i>25</i> TOWNSHIP <i>2 N</i> RANGE <i>9 E</i>		
DISTANCE <i>3</i> Miles	DIRECTION <i>East</i>	NEAREST TOWN <i>Stone Lake</i>
OTHER LANDMARK		
WELL PURPOSE <input checked="" type="checkbox"/> Home, <input type="checkbox"/> Irrigation, <input type="checkbox"/> Municipal, <input type="checkbox"/> Industrial, <input type="checkbox"/> Fish Pond, etc.		

<b>PUMP DATA</b>		
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) _____		
Pump Capacity (GPM) <i>30</i>	No. of Stages <i>7</i>	Setting Depth <i>50</i> FT.
PUMP TEST		
Well yielded <i>30</i> GPM with a drawdown of <i>10</i> ft. after <i>1</i> hours of pumping		

<b>WELL DATA</b>		
Well Depth <i>240</i>	Casing Diameter (In.) <i>4</i>	Casing Length (Ft.) <i>230</i>
Type of Casing <i>Plastic</i>	Hole Depth <i>240</i>	Depth to Static Water Level <i>2'</i>
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped, <input checked="" type="checkbox"/> Natural Development, <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other (Describe) _____		
Top of Lap Pipe or Reduction in Casing <i>_____</i> FEET IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE		

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

<b>SCREEN DATA</b>		
Diameter - Inches <i>4"</i>	Length - Feet <i>10</i>	Slot Size - Inches <i>006</i>
Screen Type <i>Plastic</i>	Depth to Bottom - Feet <i>240</i>	

<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			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
<i>Top soil</i>	<i>0</i>	<i>10</i>	<div style="border: 2px solid black; padding: 5px; display: inline-block;"> <b>RECEIVED</b>             JUN 13 1989             Department of Natural Resources            Bureau of Land &amp; Water Resources         </div>		
<i>good sand</i>	<i>10</i>	<i>25</i>			
<i>clay</i>	<i>25</i>	<i>210</i>			
<i>good sand</i>	<i>210</i>	<i>240</i>			

IF MORE SPACE IS NEEDED, USE BACK