

**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><i>George</i>  |       |
| WELL NUMBER<br><i>2005</i>            | CODED |
| DATE WELL COMPLETED<br><i>5-16-96</i> |       |

|   |
|---|
| PERMIT NUMBER                               |
| NAME OF DRILLING FIRM<br><i>Pierce Well</i> |

|   |           |                    |              |
|---|-----------|--------------------|--------------|
| NAME & MAILING ADDRESS OF LANDOWNER<br><i>Lynon Deakle</i>  |           |                    |              |
| WELL LOCATION<br><i>Lucedale, MS</i>  |           |                    |              |
| WELL LOCATION   | SEC       | TOWNSHIP           | RANGE        |
|   | <i>2</i>  | <i>2</i>           | <i>N 6 E</i> |
| DISTANCE  | DIRECTION | NEAREST TOWN       |              |
| <i>2</i> Miles  | <i>S</i>  | of <i>Lucedale</i> |              |
| OTHER LANDMARK  |           |                    |              |
| WELL PURPOSE (Circle one) <input checked="" type="checkbox"/> Home Irrigation, Municipal, Industrial, Fish Pond, etc. |           |                    |              |

|  |               |               |
|--|---------------|---------------|
| <b>PUMP DATA</b>   |               |               |
| PUMP TYPE (Circle One):<br><input checked="" type="checkbox"/> Submersible    Turbine,    Jet    Flowing Well,<br>Other (Describe) _____                         |               |               |
| POWER TYPE (Circle One):<br><input checked="" type="checkbox"/> Electric    Tractor,    Diesel,    Gasoline,    Butane,<br>Other (Describe) _____ H/P <i>1/2</i> |               |               |
| Pump Capacity (GPM)  | No. of Stages | Setting Depth |
| <i>20</i>  | <i>5</i>      | <i>80</i> FT. |
| PUMP TEST  |               |               |
| Well yielded <i>20</i> GPM with<br>a drawdown of <i>10</i> ft.<br>after <i>1</i> hours of pumping  |               |               |

|   |                                    |  |
|---|------------------------------------|--|
| <b>WELL DATA</b>  |                                    |  |
| Well Depth<br><i>90</i>   | Casing Diameter (In.)<br><i>4"</i> | Casing Length (Ft.)<br><i>80</i>         |
| Type of Casing<br><i>Plastic</i>  | Hole Depth<br><i>90</i>            | Depth to Static Water Level<br><i>50</i> |
| TYPE OF COMPLETION: (Circle One or More):<br><input checked="" type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped,<br><input checked="" type="checkbox"/> Natural Development, <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other<br>(Describe) _____ |                                    |  |
| WELL GROUTED TO A DEPTH OF <i>12</i> FEET<br>Type Grout (circle one): Cement, Bentonite, or <input checked="" type="checkbox"/> Mix   |                                    |  |

|  |  |
|--|--|
| <b>LOG DATA</b>  |  |
| TYPE OF LOG RUN (Circle One): <input checked="" type="checkbox"/> No Log Run,<br>Electric, Gamma Ray, Density, Sonic, Neutron,<br>Other (Describe) _____ |  |
| Name of Organization Running Log   |  |

|                                |                                     |                                  |
|--------------------------------|-------------------------------------|----------------------------------|
| <b>SCREEN DATA</b>             |                                     |                                  |
| Diameter - Inches<br><i>4"</i> | Length - Feet<br><i>10</i>          | Slot Size - Inches<br><i>006</i> |
| Screen Type<br><i>Plastic</i>  | Depth to Bottom - Feet<br><i>90</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                      |  |                |              |
| Top of Lap Pipe or Reduction in Casing |  |                |              |
| FEET                                   | IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE |                |              |

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM      | TO        | FORMATIONS (Continued)   | FROM | TO |
|---------------------------------------|-----------|-----------|--|------|----|
| <i>Top soil</i>                       | <i>0</i>  | <i>10</i> | <b>RECEIVED</b><br><br>MAY 29 1996<br><br>Dept. of Environmental Quality<br>Office of Land & Water Resources |      |    |
| <i>Clay</i>                           | <i>10</i> | <i>30</i> |  |      |    |
| <i>good sand</i>                      | <i>30</i> | <i>90</i> |  |      |    |
|                                       |           |           |  |      |    |
|                                       |           |           |  |      |    |
|                                       |           |           |  |      |    |
|                                       |           |           |  |      |    |
|                                       |           |           |  |      |    |
|                                       |           |           |  |      |    |

IF MORE SPACE IS NEEDED, USE BACK