

**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 <b>Grenada</b>	
WELL NUMBER <b>E-32</b>	CODED
DATE WELL COMPLETED <b>6-1-99</b>	

PERMIT NUMBER
NAME OF DRILLING FIRM <b>IRRIGATION EQUIPMENT</b>
<b>601/887-2555</b>

NAME & MAILING ADDRESS OF LANDOWNER <b>MARVIN MIMS</b> <b>9514 Hwy. 8 West</b> <b>Holcomb, MS 38940</b>			
WELL LOCATION	SEC	TOWNSHIP	RANGE
<b>SE/SE</b>	<b>11</b>	<b>22<sup>N</sup></b>	<b>2<sup>E</sup></b>
DISTANCE	DIRECTION	NEAREST TOWN	
<b>5</b> Miles	<b>NW</b>	of <b>Holcomb</b>	
OTHER LANDMARK			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. <b>Irrigation Pivot</b>			

<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) _____ H/P <b>30</b>		
Pump Capacity (GPM)	No. of Stages	Setting Depth
	<b>2</b>	<b>63</b> FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

<b>WELL DATA</b>		
Well Depth <b>77</b>	Casing Diameter (In.) <b>16</b>	Casing Length (Ft.) <b>37</b>
Type of Casing <b>PVC</b>	Hole Depth <b>77</b>	Depth to Static Water Level <b>10 Ft.</b>
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped, <input type="checkbox"/> Natural Development, <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other (Describe) _____		
WELL GROUTED TO A DEPTH OF _____ FEET Type Grout (circle one): Cement, Bentonite, or Mix		

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

<b>SCREEN DATA</b>		
Diameter - Inches <b>16</b>	Length - Feet <b>40</b>	Slot Size - Inches <b>.050</b>
Screen Type <b>PVC</b>	Depth to Bottom - Feet <b>77</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 IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<b>CLAY</b>	<b>0</b>	<b>18</b>
<b>FINE SAND</b>	<b>18</b>	<b>25</b>
<b>med. SAND + Gravel</b>	<b>25</b>	<b>64</b>
<b>CLAY</b>	<b>64</b>	<b>77</b>

FORMATIONS (Continued)	FROM	TO
<b>RECEIVED</b>		
<b>OCT 04 1999</b>		
Dept. of Environmental Quality, Office of Land & Water Resources		
IF MORE SPACE IS NEEDED, USE BACK		