

**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  
**GRENADE**

WELL NUMBER  
**F-2014**

PERMIT NUMBER

NAME OF DRILLING FIRM  
**RATLIFF Water Well Serv.**  
**11075 Hwy 8 Holcomb 38740**

DATE WELL COMPLETED  
**6-20-02**

NAME & MAILING ADDRESS OF LANDOWNER

**TOMMY JACKSON**

**104 Paschall Holcomb Ms 38740**

Latitude:  
Longitude:

WELL LOCATION: SEC **2** TOWNSHIP **21** RANGE **3**

DISTANCE **4** Miles DIRECTION **S** of NEAREST TOWN **Holcomb**

OTHER LANDMARK

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

**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 1/2**

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<b>CLAY</b>	<b>0</b>	<b>15</b>
<b>Red SAND</b>	<b>15</b>	<b>30</b>
<b>SAND</b>	<b>30</b>	<b>45</b>
<b>SAND &amp; GRAVEL</b>	<b>45</b>	<b>75</b>
<b>GRAVEL w/ CLAY</b>	<b>75</b>	<b>90</b>
<b>SANDY CLAY</b>	<b>90</b>	<b>120</b>
<b>SAND</b>	<b>120</b>	<b>135</b>

**WELL DATA**

Well Depth **135** Casing Diameter (in.) **4** Casing Length (ft.) **125**

Type of Casing **PVC** Hole Depth **135** Depth to Static Water Level **84**

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 **4"** Length - Feet **10** Slot Size - inches **10**

Screen Type **PVC** Depth to Bottom - Feet **135**

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.

**Robert E. Koster** **0-002**  
Signature of Licensed Driller and License No.

**6-20-02**  
Date

Additional Information Required On Back