

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>Harrison</i>	
WELL NUMBER <i>C 2086</i>	CODED
DATE WELL COMPLETED <i>10-4-91</i>	

PERMIT NUMBER <i>0404</i>
NAME OF DRILLING FIRM <i>LYMAN WELL CO. INC.</i>
<i>GULFPORT, MS 39503</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Willie E. Robinson</i>		
<i>25604 Airey Tower Rd</i>		
<i>Gulfport Ms 3903</i>		
WELL LOCATION: SEC	TOWNSHIP	RANGE
<i>25</i>	<i>4</i>	<i>11</i>
DISTANCE		DIRECTION
<i>30</i> Miles		<i>N</i>
		NEAREST TOWN
		<i>DA</i>
OTHER LANDMARK		
WELL PURPOSE: <input checked="" type="checkbox"/> Home, Irrigation, Municipal, Industrial, Fish Pond, etc.		

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 _____		
Pump Capacity (GPM) <i>20</i>	No. of Stages <i>7</i>	Setting Depth <i>140</i> FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

WELL DATA		
Well Depth <i>335</i>	Casing Diameter (In.) <i>4</i>	Casing Length (Ft.) <i>327</i>
Type of Casing <i>PVC</i>	Hole Depth <i>335</i>	Depth to Static Water Level
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="checkbox"/> Gravel Packed, <input checked="" 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		
FEET		
IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE		

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

SCREEN DATA		
Diameter - Inches <i>4</i>	Length - Feet <i>10</i>	Slot Size - Inches <i>8</i>
Screen Type <i>Sawed PVC</i>	Depth to Bottom - Feet <i>335</i>	

GEOLOGIC DATA (Office Use Only)			
Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test
Driller's Remarks			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Top Soil</i>	<i>0</i>	<i>2</i>
<i>Red sand on clay</i>	<i>2</i>	<i>85</i>
<i>Blue sand on clay</i>	<i>85</i>	<i>280</i>
<i>Sand section</i>	<i>280</i>	<i>335</i>

FORMATION ENCOUNTERED	FROM	TO
RECEIVED		
<i>NOV 18 1991</i>		
Dept. of Environmental Quality Bureau of Land & Water Resources		

IF MORE SPACE IS NEEDED, USE BACK

If well telescopes please sketch and show depths.

GROUND LEVEL

SECTION _____

Please indicate well location X.

ADDITIONAL INFORMATION

If more than one screen,
show location of each on sketch.