

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 HARRISON | |
| WELL NUMBER F-2180 | CODED |
| DATE WELL COMPLETED 7-15-93 | |

| |
|--|
| PERMIT NUMBER 0-239 |
| NAME OF DRILLING FIRM McDell |

| | | | |
|--|----------------|----------|---------------|
| NAME & MAILING ADDRESS OF LANDOWNER David Conner Boss Conner Rd. Muscogee, Ms. | | | |
| WELL LOCATION | SEC | TOWNSHIP | RANGE |
| | 36 | 6 | N 12 E |
| DISTANCE | DIRECTION | | NEAREST TOWN |
| 4 Miles | West of | | Gpt |
| OTHER LANDMARK | | | |
| WELL PURPOSE: <input checked="" type="checkbox"/> Home Irrigation, <input type="checkbox"/> Municipal, <input type="checkbox"/> Industrial, <input type="checkbox"/> Fish Pond, etc. | | | |

| | | |
|---|---------------------------|-----------------------------|
| PUMP DATA | | |
| PUMP TYPE (Circle One): Submersible, Turbine, <input checked="" type="radio"/> Jet, Flowing Well, Other (Describe) _____ | | |
| POWER TYPE (Circle One): Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) <input checked="" type="checkbox"/> H/P 1 | | |
| Pump Capacity (GPM) 15 | No. of Stages 2 | Setting Depth FT. |
| PUMP TEST | | |
| Well yielded 8 GPM with a drawdown of _____ ft. after 1 hours of pumping | | |

| | | |
|---|-----------------------------------|---|
| WELL DATA | | |
| Well Depth 520 | Casing Diameter (In.) 2 | Casing Length (Ft.) 500 |
| Type of Casing PVC | Hole Depth 520 | Depth to Static Water Level 60' |
| 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 | | |
| WELL GROUTED TO A DEPTH OF 10 FEET Type Grout (circle one): Cement, Bentonite, or Mix | | |

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

| | | |
|-------------------------------|----------------------------|-----------------------------------|
| SCREEN DATA | | |
| Diameter - Inches 2 | Length - Feet 20 | Slot Size - Inches 0006 |
| Screen Type pvc | Depth to Bottom - Feet | |

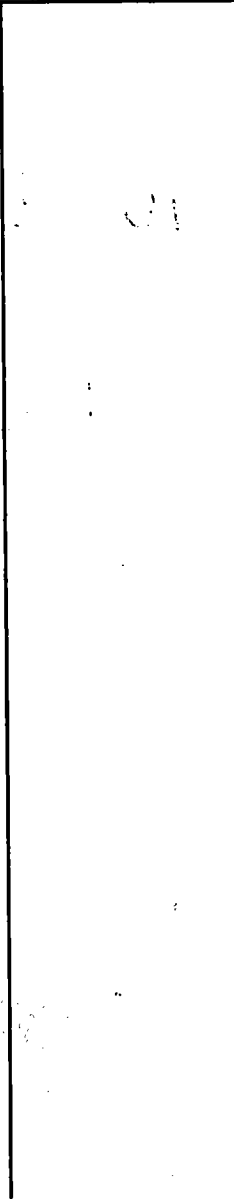
| | | | |
|--|---------------|----------------|--------------|
| GEOLOGIC DATA (Office Use Only) | | | |
| Surface Elev. | Geologic Unit | Unit Thickness | Depth to Top |
| Subs. SWL | Date | Analysis | Aquifer Test |
| Driller's Remarks | | | |
| Top of Lap Pipe or Reduction in Casing | | | |
| FEET <input type="checkbox"/> IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE | | | |

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM | TO |
|---------------------------------------|------------|------------|
| Sand | 0 | 60 |
| mud | 60 | 280 |
| mud sand mud | 280 | 320 |
| mud | 320 | 420 |
| mud - sand | 420 | 460 |
| Sand | 460 | 520 |
| | | |
| | | |
| | | |
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| RECEIVED | |
| DEC 04 1996 | |
| Dept. of Environmental Quality Office 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.