

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 <i>Jackson</i>	
WELL NUMBER <i>A-2035</i>	CODED
DATE WELL COMPLETED <i>8-29-01</i>	

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

NAME & MAILING ADDRESS OF LANDOWNER <i>Kenny Roberts Frontier Road Van Cleave, Ms</i>			
Latitude: Longitude:			
WELL LOCATION	SEC <i>3</i>	TOWNSHIP <i>4 N 8 E</i>	RANGE
DISTANCE <i>1/2</i> Miles	DIRECTION <i>S</i>	NEAREST TOWN <i>George Co. home</i>	
OTHER LANDMARK			
WELL PURPOSE (<input checked="" type="checkbox"/> Home) Irrigation, Municipal, Industrial, Fish Pond, etc.			

PUMP DATA	
PUMP TYPE (Circle One): Submersible, Turbine, <input checked="" type="radio"/> <u>Jet</u> Flowing Well, Other (Describe) _____	
POWER TYPE (Circle One): <input checked="" type="radio"/> Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P <u>1</u>	

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Top soil</i>	<i>0</i>	<i>10</i>
<i>Clay</i>	<i>10</i>	<i>20</i>
<i>Sand</i>	<i>20</i>	<i>60</i>
<i>Clay</i>	<i>60</i>	<i>295</i>
<i>good Sand</i>	<i>295</i>	<i>310</i>

WELL DATA		
Well Depth <i>310'</i>	Casing Diameter (In.) <i>2"</i>	Casing Length (Ft.) <i>300</i>
Type of Casing <i>Plastic</i>	Hole Depth <i>310'</i>	Depth to Static Water Level <i>2' above top of gravel</i> <i>flowing</i>
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 (Describe) _____		
WELL GROUTED TO A DEPTH OF <u>15</u> FEET Type Grout (circle one): Cement, Bentonite, <input checked="" type="radio"/> <u>Mix</u>		

SCREEN DATA		
Diameter - Inches <i>2"</i>	Length - Feet <i>10'</i>	Slot Size - Inches <i>006</i>
Screen Type <i>Plastic</i>	Depth to Bottom - Feet <i>310'</i>	
Top of Lap Pipe or Reduction in Casing <i>-0 - FEET</i>		
IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE		

REC'D OCT 30 2001

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.

Michael Pierce
Signature of Licensed Driller and License No.

10-27-01
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

SECTION _____

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
10	2	20 FT.

PUMP TEST

Well yielded 10 GPM with
a drawdown of 10 ft.
after 1 hours of pumping

LOG DATA

TYPE OF LOG RUN (Circle One): No Log Run.
Electric, Gamma Ray, Density, Sonic, Neutron,
Other (Describe) _____

Name of Organization Running Log

GEOLOGIC DATA (Office Use Only)

Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test

Driller's Remarks

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