

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY
Bureau of Land and Water Resources

P. O. Box 10631
Jackson, MS 39289-0631
WATER WELL DRILLERS LOG

30-10648-8
SOUTHERN WATER WELL SERVICE
Post Office Box 185
Hurley, MS 39555
Phone 588-2756

COUNTY WELL LOCATED
Jackson
WELL NUMBER *D 2482* CODED
DATE WELL COMPLETED
6/16/94

PERMIT NUMBER
NAME OF DRILLING EQUIPMENT
588-2756

NAME & MAILING ADDRESS OF LANDOWNER
John Erwin
Hwy 614
Hurley MS 39555
WELL LOCATION: SEC _____ TOWNSHIP _____ RANGE _____
34 4 N 5 W
DISTANCE _____ Miles DIRECTION _____ of _____ NEAREST TOWN _____
OTHER LANDMARK _____
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.

PUMP DATA
PUMP TYPE (Circle One):
Submersible, Turbine, Jet, Flowing Well, Other (Describe) *Topping Installed*
POWER TYPE (Circle One):
Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P _____
Pump Capacity (GPM) _____ No. of Stages _____ Setting Depth _____ FT.
PUMP TEST
Well yielded _____ GPM with
a drawdown of _____ ft.
after _____ hours of pumping

WELL DATA
Well Depth *40'* Casing Diameter (In.) *2"* Casing Length (Ft.) *35'*
Type of Casing *PVC* Hole Depth *40'* Depth to Static Water Level *5'*
TYPE OF COMPLETION: (Circle One or More):
Gravel Packed, Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) *air*
Top of Lap Pipe or Reduction in Casing
FEET IF TELESKOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

LOG DATA
TYPE OF LOG RUN (Circle One):
No Log Run, Electric, Gamma Ray, Density, Sonic, Neutron, Other (Describe) _____
Name of Organization Running Log _____

SCREEN DATA
Diameter - Inches *2"* Length - Feet *5'* Slot Size - Inches *#8*
Screen Type *PVC* Depth to Bottom - Feet *40*

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	FORMATION(S) CONTINUED	FROM	TO
<i>sand</i>	<i>0</i>	<i>40</i>			

RECEIVED
AUG 23 1994

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

DEVINSON
1891-1901

What kind of well
equipment used?

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