

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
Jackson

WELL NUMBER CODED
D-2261

DATE WELL COMPLETED
527-00

PERMIT NUMBER

NAME OF DRILLING FIRM
Pierce Well

NAME & MAILING ADDRESS OF LANDOWNER
Kenny Ballard

Hurley .ms

WELL LOCATION: SEC 4 TOWNSHIP 4 RANGE 5
N **S** **E** **W**

DISTANCE 1 Miles DIRECTION S of NEAREST TOWN CC Line

OTHER LANDMARK

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

PUMP DATA

PUMP TYPE (Circle One):
Submersible, Turbine, Flowing Well, Other (Describe) _____

POWER TYPE (Circle One):
 Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P 1

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

PUMP TEST

Well yielded 10 GPM with a drawdown of 5 ft. after 1 hours of pumping

WELL DATA

Well Depth 65' Casing Diameter (In.) 2" Casing Length (Ft.) 60'

Type of Casing Plastic Hole Depth 65' Depth to Static Water Level 30'

TYPE OF COMPLETION: (Circle One or More):
 Gravel Packed, Natural Development, Underreamed, Open Hole, Telescoped, Other

WELL GROUTED TO A DEPTH OF 15 FEET
Type Grout (circle one): Cement, Bentonite, or Mix

LOG DATA

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

Name of Organization Running Log

SCREEN DATA

Diameter - Inches 2" Length - Feet 5' Slot Size - Inches 006

Screen Type Plastic Depth to Bottom - Feet 65'

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 Log 65' (if telescoped or more than ONE SCREEN: USE BACK PAGE)

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
<u>top soil</u>	<u>0</u>	<u>10</u>			
<u>clay</u>	<u>10</u>	<u>25</u>			
<u>good sand</u>	<u>25</u>	<u>65</u>			

IF MORE SPACE IS NEEDED, USE BACK

RECEIVED

JUN 27 2000

Dept. of Environmental Quality
Office of Land & Water Resources

If well telescopes please sketch and show depths.

GROUND LEVEL

SECTION _____

Please indicate well location X.

ADDITIONAL INFORMATION

REGISTERED

NO. 1 2 3 4 5

OFFICE OF THE STATE ENGINEER
DEPT. OF PUBLIC SAFETY & FIRE PROTECTION
STATE OF CALIFORNIA

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