

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>Jefferson</i>		<i>Davis</i>	
WELL NUMBER <i>2032</i>	CODED	PERMIT NUMBER <i>10-586</i>	NAME OF DRILLING FIRM <i>James Wells Water Well</i>
DATE WELL COMPLETED <i>6-7-2000</i>			

NAME & MAILING ADDRESS OF LANDOWNER <i>H.D. McJee</i>			
<i>RT 3, Box 11</i>			
<i>Prentiss Ms. 39474</i>			
WELL LOCATION	SEC	TOWNSHIP	RANGE
	<i>14</i>	<i>7</i>	<i>19</i>
DISTANCE		DIRECTION	NEAREST TOWN
<i>1</i> Miles		<i>S EAST</i>	<i>Prentiss</i>
OTHER LANDMARK <i>Bullock Rd.</i>			
WELL PURPOSE <input type="checkbox"/> Home <input type="checkbox"/> Irrigation <input type="checkbox"/> Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Fish Pond, etc.			

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

WELL DATA		
Well Depth <i>155</i>	Casing Diameter (In) <i>4</i>	Casing Length (Ft) <i>135</i>
Type of Casing <i>PVC</i>	Hole Depth <i>155</i>	Depth to Static Water Level <i>110</i>

TYPE OF COMPLETION: (Circle One or More):
 Gravel Pack Underreamed Telescoped
 Natural Development Open Hole Other
 (Describe) _____

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

SCREEN DATA		
Diameter - Inches <i>4</i>	Length - Feet <i>20</i>	Slot Size - Inches <i>800</i>
Screen Type <i>PVC</i>	Depth to Bottom - Feet <i>135 - 155</i>	

LOG DATA	
TYPE OF LOG RUN (Circle One): <input type="checkbox"/> No Log Run <input type="checkbox"/> Electric <input type="checkbox"/> Gamma Ray <input type="checkbox"/> Density <input type="checkbox"/> Sonic <input type="checkbox"/> 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	
Top of Lap Pipe or Reduction in Casing	
FEET	IF TELESCOPED OR MORE THAN ONE SCREEN, USE BACK PAGE

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
<i>Clay</i>	<i>0</i>	<i>20</i>	<i>Clay (G.I.M.V.R.)</i>		
<i>Red Gravel</i>	<i>20</i>	<i>35</i>	<i>Gravel</i>		
<i>Clay</i>	<i>35</i>	<i>110</i>			
<i>Sand</i>	<i>110</i>	<i>155</i>			
<i>JUL 20 2000</i>					
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.