

MISSISSIPPI DEPARTMENT OF NATURAL RESOURCES
Bureau of Land and Water Resources

P.O. Box 10631

Jackson, Mississippi 39209

WATER WELL DRILLERS LOG

COUNTY WELL LOCATED
LeFlore

WELL NUMBER
F2009

DATE WELL COMPLETED
9-19-90

PERMIT NUMBER
6426

NAME OF DRILLING FIRM
Dyn Well

NAME & MAILING ADDRESS OF LANDOWNER
**Tupelo Plt
Rt 1 Box E74
Schluter, Ms.**

WELL LOCATION: SEC **12** TOWNSHIP **20** RANGE **2**
N S E W

DISTANCE _____ MILES _____ of _____
DIRECTION _____ 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) _____

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

Pump Capacity (GPM) **2000** No. of Stages **2** Setting Depth **60** FT.

PUMP TEST
Well yielded _____ GPM with
a drawdown of _____ ft.
after _____ hours of pumping

WELL DATA

| | | |
|--------------------------------|-------------------------------------|-----------------------------------|
| Well Depth 113' | Casing Diameter (In.) 16" | Casing Length (Ft.) 73' |
| Type of Casing steel | Hole Depth | Depth to Static Water Level |

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

Top of Lap Pipe or Reduction in Casing
FEET _____ IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

LOG DATA

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

Name of Organization Running Log
None

SCREEN DATA

| | | |
|---------------------------------|--------------------------------------|-----------------------------------|
| Diameter - Inches 16" | Length - Feet 40' | Slot Size - Inches .030 |
| Screen Type Wire Wrap | Depth to Bottom - Feet 113 | |

GEOLOGIC DATA (Office Use Only)

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

Driller's Remarks

RECEIVED

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM | TO | FORMATIONS (Continued) | FROM | TO |
|---------------------------------------|------------|------------|------------------------|------|----|
| Clay | 0 | 28 | DEC 20 1990 | | |
| Fine Sand | 28 | 48 | | | |
| Fine Sand + Gravel | 48 | 84 | | | |
| M Sand + Gravel | 84 | 95 | | | |
| Fine Sand + Gravel | 95 | 100 | | | |
| M Sand + Gravel | 100 | 113 | | | |
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Department of Natural Resources
Bureau of Land & Water Resources

IF MORE SPACE IS NEEDED, USE BACK

If well telescopes please
sketch and show depths.

GROUND LEVEL

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| | | | |

SECTION _____

Please indicate well location X.

ADDITIONAL INFORMATION

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