

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Office of Land and Water Resources

COUNTY WELL LOCATED Leflore	
WELL NUMBER H-140	CODED
DATE WELL COMPLETED 5-27-04	

PERMIT NUMBER GW-39722
NAME OF DRILLING FIRM Irrigation Equipment Inc.
Indianola, MS

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

NAME & MAILING ADDRESS OF LANDOWNER Jeff Sisk 8 Wynnewood Drive Wynne, AR 72396

Latitude:
Longitude:

WELL LOCATION.	SEC 30	TOWNSHIP 20N	RANGE 1E	N	E
				S	W

DISTANCE	DIRECTION	NEAREST TOWN
_____ Miles	NW	Greenwood

OTHER LANDMARK

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

WELL DATA

Well Depth 111	Casing Diameter (In.) 16	Casing Length (Ft.) 71
Type of Casing pvc	Hole Depth 111	Depth to Static Water Level 19ft.

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

WELL GROUTED TO A DEPTH OF **10** FEET
 Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

Diameter - Inches 16	Length - Feet 40	Slot Size - Inches .050
Screen Type pvc	Depth to Bottom - Feet 111	

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 **60**

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Clay	0	28
Fine Sand	29	35
Fine Sand/gravel	36	45
Med. Sand/gravel	46	110
Clay	111	

RECEIVED

JUN 15 2004

BY: OLIVER

RECEIVED

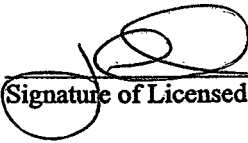
JUN 1 2004

BY: OLIVER

Top of Lap Pipe or Reduction in Casing

FEET IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

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.

 _____
 Signature of Licensed Driller and License No. **0439**

 Date **6-12-04**

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

X			

SECTION 30

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
2500 to 3000	1	60 FT.

PUMP TEST

Well yielded _____ GPM with
a drawdown of _____ ft.
after _____ 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.