

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 Leflore	
WELL NUMBER 12020	CODED
DATE WELL COMPLETED 4-25-97	

PERMIT NUMBER
NAME OF DRILLING FIRM Irrigation Equipment
Indianola, MS

NAME & MAILING ADDRESS OF LANDOWNER Scotland Fisheries			
Rt.1, Box 170L			
Itta Bena, MS 38941			
WELL LOCATION:	SEC 6	TOWNSHIP 19N	RANGE 2W
		S	W
DISTANCE 7	DIRECTION NW	NEAREST TOWN Itta Bena	
	Miles	of	
OTHER LANDMARK			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. Fish Pond			

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 30		
Pump Capacity (GPM) 1500	No. of Stages 2	Setting Depth 80 FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

WELL DATA

Well Depth 114	Casing Diameter (In.) 16	Casing Length (Ft.) 64
Type of Casing PVC	Hole Depth 114	Depth to Static Water Level 47 ft.
TYPE OF COMPLETION: (Circle One or More): (Gravel Packed) , Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) _____		

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

SCREEN DATA

Diameter - Inches 16	Length - Feet 50	Slot Size - Inches .050
Screen Type PVC	Depth to Bottom - Feet 114	

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

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
Clay	0	31
Fine sand	31	40
Fine sand & Gravel	40	55
Med. sand & Gravel	55	85
Fine Sand	85	95
Med. Sand & Gravel	95	114

FORMATIONS (Continued)

FROM

TO

RECEIVED

AUG 15 1997

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

			x

SECTION 6

Please indicate well location X.

ADDITIONAL INFORMATION

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