

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Office of Land and Water Resources

COUNTY WELL LOCATED
LEFLORE

WELL NUMBER **2** **R90** CODED

DATE WELL COMPLETED
10/04/95

PERMIT NUMBER _____

NAME OF DRILLING FIRM
LAYNE-CENTRAL, a division
of Layne Christensen Co.

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

NAME & MAILING ADDRESS OF LANDOWNER
TACKETT FARMS

ROUTE 1, BOX 187

SCHLATER, MS 38952

WELL LOCATION: SEC **3** TOWNSHIP **19** RANGE **1**
N **S** **E** **W**

DISTANCE **4** Miles DIRECTION **NW** of NEAREST TOWN **GREENWOOD**

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) | No. of Stages | Setting Depth |
| 2500 | 1 | 60' FT. |

PUMP TEST
NOT TESTED

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

WELL DATA

| | | |
|------------------------------|-------------------------------------|---|
| Well Depth 120' | Casing Diameter (In.) 16" | Casing Length (Ft.) 60' |
| Type of Casing PVC | Hole Depth 120' | Depth to Static Water Level 25' |

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

LOG DATA

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

Name of Organization Running Log _____

SCREEN DATA

| | | |
|---------------------------------|---------------------------------------|-----------------------------------|
| Diameter - Inches 16" | Length - Feet 60' | Slot Size - Inches .050 |
| Screen Type PVC | Depth to Bottom - Feet 120' | |

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 TELESKOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM | TO |
|---------------------------------------|------|-----|
| CLAY | 0 | 34 |
| SAND | 34 | 50 |
| SAND & GRAVEL | 50 | 98 |
| ROCK | 98 | 99 |
| GRAVEL | 99 | 120 |
| CLAY | 120 | 124 |
| | | |
| | | |
| | | |
| | | |

| FORMATIONS (Continued) | FROM | TO |
|--|------|----|
| RECEIVED | | |
| JUN 07 1996 | | |
| 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.