

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 <u>1</u>	CODED
DATE WELL COMPLETED <u>2-18-04</u>	

PERMIT NUMBER
NAME OF DRILLING FIRM <u>CBS Drilling</u>

NAME & MAILING ADDRESS OF LANDOWNER
Hoyt Hayes Cont. Co
75 Miller Ave
JACKSON, TN. 38305

Latitude:
Longitude:

WELL LOCATION	SEC <u>12</u>	TOWNSHIP <u>T19 N</u>	RANGE <u>R1 W</u>
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DISTANCE <u>4</u> Miles	DIRECTION <u>W</u>	NEAREST TOWN <u>Greenwood</u>
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OTHER LANDMARK

WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.
To Build Motor Co.

WELL DATA

Well Depth <u>415</u>	Casing Diameter (In.) <u>4"</u>	Casing Length (Ft.) <u>395</u>
Type of Casing <u>PUC</u>	Hole Depth <u>420</u>	Depth to Static Water Level <u>28</u>

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 <u>4</u>	Length - Feet <u>20</u>	Slot Size - Inches <u>.010</u>
Screen Type <u>PUC</u>	Depth to Bottom - Feet <u>415</u>	

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 3

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>TOP SOIL & CLAY</u>	<u>0</u>	<u>18</u>
<u>SAND</u>	<u>18</u>	<u>57</u>
<u>SAND & GRAVEL & GRAV</u>	<u>57</u>	<u>118</u>
<u>SAND & ST. CLAY</u>	<u>118</u>	<u>141</u>
<u>CLAY</u>	<u>141</u>	<u>186</u>
<u>SAND</u>	<u>186</u>	<u>257</u>
<u>H. Shell</u>	<u>257</u>	<u>310</u>
<u>Shell</u>	<u>310</u>	<u>376</u>
<u>Green sand</u>	<u>376</u>	<u>415</u>
<u>Shale</u>	<u>415</u>	<u>420</u>

RECEIVED
~~RECEIVED~~
FEB 20 2004
BY: OLWF

Top of Lap Pipe or Reduction in Casing

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

Cabin Sullivan D-0534
Signature of Licensed Driller and License No.

2-17-04
Date

If well telescopes please sketch and show depths.

GROUND LEVEL

	7	X	

SECTION _____

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth	
40	11	126	FT.

PUMP TEST

Well yielded 55 GPM with
 a drawdown of 32 ft.
 after 12 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.