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: Lincoln	
WELL NUMBER: 174049	CODED:
D-2031	
DATE WELL COMPLETED: 6-2-99	

PERMIT NUMBER: 510	
NAME OF DRILLING FIRM: Easley Waterwell	
Brookhaven, MS 39601	

NAME & MAILING ADDRESS OF LANDOWNER: Daryle Hearne

WELL LOCATION: SEC 23 TOWNSHIP 8 (N) S RANGE 8 (E) W

DISTANCE _____ Miles DIRECTION _____ of 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) _____

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

PUMP TEST

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

WELL DATA

Well Depth	Casing Diameter (In.)	Casing Length (Ft.)
200'	4"	180'

Type of Casing	Hole Depth	Depth to Static Water Level
PVC	220'	

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): 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

SCREEN DATA

Diameter - Inches	Length - Feet	Slot Size - Inches
4"	20'	010"

Screen Type	Depth to Bottom - Feet
PVC	200'

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
Clay	0	10			
Sand	10	40			
Clay	40	180			
Sand	180	200			
Clay	200	220			
			IF MORE SPACE IS NEEDED, USE BACK		

If well telescopes please
sketch and show depths.

GROUND LEVEL

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

SECTION _____

Please indicate well location X.

ADDITIONAL INFORMATION