

**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 <u>Lincoln</u>	
WELL NUMBER <u>828411</u>	CODED
<u>F-60</u>	
DATE WELL COMPLETED <u>9-2-04</u>	

PERMIT NUMBER
NAME OF DRILLING FIRM <u>Easley Waterwell</u>

NAME & MAILING ADDRESS OF LANDOWNER <u>Linda Bessouette</u>
<u>1046 Opelousas Ln NW</u>
<u>Brookhaven MS 39601</u>

Latitude:
Longitude:

WELL LOCATION. SEC <u>28</u> TOWNSHIP <u>N 7</u> RANGE <u>6</u>
DISTANCE _____ DIRECTION _____ NEAREST TOWN _____
Miles _____ of _____

OTHER LANDMARK
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WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. <u>Campsite</u>
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<b>PUMP DATA</b>
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PUMP TYPE (Circle One): <u>Submersible</u> , Turbine, Jet, Flowing Well, Other (Describe) _____
POWER TYPE (Circle One): <u>Electric</u> , Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P <u>1</u>

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>Sand</u>	<u>0</u>	<u>20</u>
<u>Clay</u>	<u>20</u>	<u>90</u>
<u>Sand</u>	<u>90</u>	<u>200</u>
<u>Clay</u>	<u>200</u>	<u>220</u>

**WELL DATA**

Well Depth <u>200'</u>	Casing Diameter (In.) <u>4"</u>	Casing Length (Ft.) <u>180'</u>
Type of Casing <u>PVC</u>	Hole Depth <u>220'</u>	Depth to Static Water Level <u>3'</u>

TYPE OF COMPLETION: (Circle One or More): <u>Natural Development</u> , <u>Gravel Packed</u> , Underreamed, Telescoped, Open Hole, Other (Describe) _____
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WELL GROUTED TO A DEPTH OF <u>10</u> FEET Type Grout (circle one): Cement, Bentonite, or Mix
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**SCREEN DATA**

Diameter - Inches <u>4"</u>	Length - Feet <u>20'</u>	Slot Size - Inches <u>010''</u>
Screen Type <u>PVC</u>	Depth to Bottom - Feet <u>200'</u>	

<b>RECEIVED</b>
<b>OCT 06 2004</b>
<b>BY: OLWR</b>
Top of Lap Pipe or Reduction in Casing  FEET <input type="checkbox"/> 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.

510  
Signature of Licensed Driller and License No.

9-2-04  
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL


SECTION \_\_\_\_\_

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
20	9	20 FT.

PUMP TEST

Well yielded 100 GPM with  
 a drawdown of 5 ft.  
 after 3 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.