

# MISSISSIPPI DEPARTMENT OF NATURAL RESOURCES

Bureau of Land and Water Resources

COUNTY WELL LOCATED <b>Lincoln</b>	
WELL NUMBER <b>376985</b>	CODED
<b>G 231</b>	
DATE WELL COMPLETED <b>10-21-91</b>	

PERMIT NUMBER <b>510</b>
NAME OF DRILLING FIRM <b>Easley Water Well</b>
<b>Brookhaven, MS 39601</b>

P.O. Box 10631  
Jackson, Mississippi 39209  
**WATER WELL DRILLERS LOG**

NAME & MAILING ADDRESS OF LANDOWNER <b>Tom Merritt</b>			
WELL LOCATION: SEC	TOWNSHIP	RANGE	
<b>35</b>	<b>7</b>	<b>7</b>	
DISTANCE	DIRECTION	NEAREST TOWN	
<b>2</b> Miles	<b>W</b>	<b>of BROOKHAVEN</b>	
OTHER LANDMARK			
WELL PURPOSE <input checked="" type="checkbox"/> Home, <input type="checkbox"/> Irrigation, <input type="checkbox"/> Municipal, <input type="checkbox"/> Industrial, <input type="checkbox"/> Fish Pond, etc.			

<b>PUMP DATA</b>		
PUMP TYPE (Circle One): <input checked="" type="radio"/> Submersible <input type="radio"/> Turbine, <input type="radio"/> Jet <input type="radio"/> Flowing Well, Other (Describe) <b>2-HP</b>		
POWER TYPE (Circle One): <input type="radio"/> Electric, <input type="radio"/> Tractor, <input type="radio"/> Diesel, <input type="radio"/> Gasoline, <input type="radio"/> Butane, Other (Describe)		
Pump Capacity (GPM)	No. of Stages	Setting Depth
	<b>18</b>	FT.
PUMP TEST		
Well yielded _____ GPM with		
a drawdown of _____ ft.		
after _____ hours of pumping		

<b>WELL DATA</b>		
Well Depth	Casing Diameter (In.)	Casing Length (Ft.)
<b>165'</b>	<b>4"</b>	<b>145'</b>
Type of Casing	Hole Depth	Depth to Static Water Level
<b>PVC</b>	<b>165'</b>	
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped, <input checked="" type="checkbox"/> Natural Development <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other (Describe)		
Top of Lap Pipe or Reduction in Casing		
FEET <input type="checkbox"/> IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE		

<b>LOG DATA</b>	
TYPE OF LOG RUN (Circle One): <input checked="" type="radio"/> No Log Run, <input type="radio"/> Electric, <input type="radio"/> Gamma Ray, <input type="radio"/> Density, <input type="radio"/> Sonic, <input type="radio"/> Neutron, Other (Describe)	
Name of Organization Running Log	

<b>SCREEN DATA</b>		
Diameter - Inches	Length - Feet	Slot Size - Inches
<b>4"</b>	<b>20'</b>	<b>010</b>
Screen Type	Depth to Bottom - Feet	
<b>PVC</b>	<b>165'</b>	

<b>GEOLOGIC DATA (Office Use Only)</b>			
Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test

Driller's Remarks

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS ENCOUNTERED FROM	TO
<b>Clay</b>	<b>0</b>	<b>10'</b>		
<b>Yellow Sand</b>	<b>10'</b>	<b>40'</b>		
<b>Blue Chalk</b>	<b>40'</b>	<b>125'</b>		
<b>SAND</b>	<b>125'</b>	<b>145'</b>		
<b>Blue Chalk</b>	<b>145'</b>	<b>165'</b>		
			<b>Dept. of Environmental Quality</b> <b>Bureau of Land &amp; Water Resources</b>	
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.