

MISSISSIPPI DEPARTMENT OF NATURAL RESOURCES

Bureau of Land and Water Resources

COUNTY WELL LOCATED <i>Lincoln</i>	
WELL NUMBER 531563	CODED
<i>R 210</i> DATE WELL COMPLETED 5-23-94	

PERMIT NUMBER 510
NAME OF DRILLING FIRM Easley Water Wells
Brookhaven, MS 39601

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

NAME & MAILING ADDRESS OF LANDOWNER Lewis K. May		
WELL LOCATION: SEC	TOWNSHIP	RANGE
<i>20</i>	<i>6</i>	<i>6</i>
	<i>N</i> S	<i>W</i> E
DISTANCE	DIRECTION	NEAREST TOWN
_____ Miles	_____ of _____	_____
OTHER LANDMARK _____		
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.		

PUMP DATA		
PUMP TYPE (Circle One): <input checked="" type="checkbox"/> Submersible Turbine, Jet Flowing Well, Other (Describe) <u><i>5 HP</i></u>		
POWER TYPE (Circle One): <input checked="" type="checkbox"/> Electric Tractor, Diesel, Gasoline, Butane, Other (Describe) _____		
Pump Capacity (GPM) <i>10</i>	No. of Stages <i>9</i>	Setting Depth FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

WELL DATA		
Well Depth 100'	Casing Diameter (In.) 4"	Casing Length (Ft.) 80
Type of Casing <i>PVC</i>	Hole Depth 100	Depth to Static Water Level
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		
IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE		

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

SCREEN DATA		
Diameter - Inches 4"	Length - Feet 20	Slot Size - Inches 12
Screen Type <i>PVC</i>	Depth to Bottom - Feet 100	

GEOLOGIC DATA (Office Use Only)			
Surface Elev. _____	Geologic Unit _____	Unit Thickness _____	Depth to Top _____
Subs. SW _____	Age _____	Analysis _____	Aquifer Test _____
Driller's Remarks			
AUG 30 1995			
Dept. of Environmental Quality Office of Land & Water Resources			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
<i>Clay</i>	<i>0</i>	<i>40</i>			
<i>Gravel</i>	<i>40</i>	<i>60</i>			
<i>Clay</i>	<i>60</i>	<i>70</i>			
<i>Sand</i>	<i>70</i>	<i>80</i>			
<i>Clay</i>	<i>80</i>	<i>100</i>			

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.