

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  
Lincoln

WELL NUMBER  
82405

CODED  
L-2186

DATE WELL COMPLETED  
9-13-02

PERMIT NUMBER  
510

NAME OF DRILLING FIRM  
Easley Waterwell

900 Denton Tel

NAME & MAILING ADDRESS OF LANDOWNER  
Joe W. Smith

337 Low Water Ln SW

Latitude: Beockhaven MS 39601

Longitude:

WELL LOCATION. SEC 5 TOWNSHIP 6 RANGE 6 (E) (W)

DISTANCE \_\_\_\_\_ DIRECTION \_\_\_\_\_ NEAREST TOWN \_\_\_\_\_

Miles \_\_\_\_\_ of \_\_\_\_\_

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) \_\_\_\_\_ H/P \_\_\_\_\_

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM | TO  |
|---------------------------------------|------|-----|
| CLAY                                  | 0    | 20  |
| Gravel                                | 20   | 80  |
| Clay                                  | 80   | 160 |
| Sand                                  | 160  | 180 |
| CLAY                                  | 180  | 200 |

WELL DATA

Well Depth 180' Casing Diameter (In.) 4" Casing Length (Ft.) 160'

Type of Casing PVC Hole Depth 200' Depth to Static Water Level \_\_\_\_\_

TYPE OF COMPLETION: (Circle One or More):  
Gravel Packed, Underreamed, Telescoped,  
Natural Development, Open Hole, Other (Describe) \_\_\_\_\_

WELL GROUTED TO A DEPTH OF \_\_\_\_\_ FEET  
Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

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

Screen Type PVC Depth to Bottom - Feet 180

RECEIVED  
JUN 11 2002

Dept. of Environmental Quality  
Office of Land & Water Resources

Top of Lap Pipe or Reduction in Casing \_\_\_\_\_ FEET

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.

J J Easley 510  
Signature of Licensed Driller and License No.

9-13-01  
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 | FT. |
| PUMP TEST                    |               |               |     |
| Well yielded _____ GPM with  |               |               |     |
| a drawdown of _____ ft.      |               |               |     |
| after _____ 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.