

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 <i>Lincoln</i>	
WELL NUMBER <i>N 2068</i>	CODED
DATE WELL COMPLETED <i>11-26-90</i>	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Gunn Water Well & Supply Inc.</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Thomas Beeson</i>			
<i>Rt 1 Box 459A</i>			
<i>Brookhaven, MS</i>			
WELL LOCATION: SEC	TOWNSHIP	RANGE	
<i>14</i>	<i>6</i>	<i>9</i>	<i>W</i>
DISTANCE	DIRECTION	NEAREST TOWN	
_____ Miles	_____ of	_____	
OTHER LANDMARK			
WELL PURPOSE: <i>Home Irrigation</i> , 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 <i>115</i>	Casing Diameter (In.) <i>4</i>	Casing Length (Ft.) <i>105</i>
Type of Casing <i>PVC</i>	Hole Depth <i>115</i>	Depth to Static Water Level <i>74</i>
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped, <input 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): No Log Run, Electric, Gamma Ray, Density, Sonic, Neutron, Other (Describe) _____	
Name of Organization Running Log	

SCREEN DATA		
Diameter - Inches <i>4</i>	Length - Feet <i>10</i>	Slot Size - Inches <i>.010</i>
Screen Type <i>PVC</i>	Depth to Bottom - Feet <i>115</i>	

GEOLOGIC DATA (Office Use Only)			
Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test
Driller's Remarks			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Sandy Clay</i>	<i>0</i>	<i>45</i>
<i>Gravel</i>	<i>45</i>	<i>55</i>
<i>Clay</i>	<i>55</i>	<i>60</i>
<i>Sand</i>	<i>60</i>	<i>115</i>

FORMATIONS (Continued)	FROM	TO
<div style="font-size: 2em; font-weight: bold; opacity: 0.5;">RECEIVED</div> <div style="font-size: 1.5em; font-weight: bold; margin-top: 10px;">MAR 14 1991</div> <div style="text-align: center; margin-top: 20px;"> Dept. of Environmental Quality Bureau of Land & Water Resources </div>		

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.