

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>Lincath</i>	
WELL NUMBER 77196	CODED
<i>2064</i>	
DATE WELL COMPLETED 7-18-96	

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

NAME & MAILING ADDRESS OF LANDOWNER Mr. Allred		
WELL LOCATION: SEC	TOWNSHIP	RANGE
23	5	6
<div style="display: flex; justify-content: space-around;"> N E </div> <div style="display: flex; justify-content: space-around;"> S W </div>		
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="radio"/> Submersible Turbine, Jet Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): <input checked="" type="radio"/> 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 100'	Casing Diameter (In.) 4"	Casing Length (Ft.) 80'
Type of Casing PVC	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): No Log Run, Electric, Gamma Ray; Density, Sonic, Neutron, Other (Describe) _____	
Name of Organization Running Log	

SCREEN DATA		
Diameter - Inches 4"	Length - Feet 20'	Slot Size - Inches 10
Screen Type PVC	Depth to Bottom - Feet 100'	

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	FORMATIONS (Continued)	FROM	TO
<i>Clay</i>	<i>0</i>	<i>20</i>	<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;">AUG 19 1997</div> <div style="text-align: center; margin-top: 20px;"> Dept. of Environmental Quality Office of Land & Water Resources </div>		
<i>Sand-Gravel</i>	<i>20</i>	<i>80</i>			
<i>Sand</i>	<i>80</i>	<i>100</i>			
<i>Clay</i>	<i>100</i>	<i>120</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.