

# 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>Leflore</i>	
WELL NUMBER <b>P 2064</b>	CODED
DATE WELL COMPLETED <b>1-14-87</b>	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Green Water Well &amp; Supply</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Curtis E. Moak</i>		
<i>200 S Chestnut</i>		
<i>McComb, Ms.</i>		
WELL LOCATION: SEC	TOWNSHIP	RANGE
<i>29</i>	<i>5</i>	<i>N 7 E</i>
		<i>S W</i>
DISTANCE	DIRECTION	NEAREST TOWN
<i>5</i> Miles	<i>SW</i>	<i>Boque Chitto</i>
OTHER LANDMARK		
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. <i>Home</i>		

<b>PUMP DATA</b>		
PUMP TYPE (Circle One): <input checked="" type="checkbox"/> Submersible, <input type="checkbox"/> Turbine, <input type="checkbox"/> Jet <input type="checkbox"/> Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): <input checked="" type="checkbox"/> Electric, <input type="checkbox"/> Tractor, <input type="checkbox"/> Diesel, <input type="checkbox"/> Gasoline, <input type="checkbox"/> Butane, Other (Describe) _____		
Pump Capacity (GPM) <i>10</i>	No. of Stages <i>10</i>	Setting Depth <i>65</i> FT.
PUMP TEST		
Well yielded <i>10</i> GPM with a drawdown of <i>0</i> ft. after <i>10 min.</i> hours of pumping		

<b>WELL DATA</b>		
Well Depth <i>90</i>	Casing Diameter (In.) <i>4</i>	Casing Length (Ft.) <i>80</i>
Type of Casing <i>PVC</i>	Hole Depth <i>100</i>	Depth to Static Water Level <i>35</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 <input type="checkbox"/> IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE		

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

<b>SCREEN DATA</b>		
Diameter - Inches <i>4</i>	Length - Feet <i>10</i>	Slot Size - Inches <i>1010</i>
Screen Type <i>PVC</i>	Depth to Bottom - Feet <i>90</i>	

<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
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RECEIVED

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
<i>Cretaceous</i>	<i>1</i>	<i>100</i>			
<div style="font-size: 1.5em; font-weight: bold; margin-bottom: 10px;">FEB 02 1987</div> <div style="font-weight: bold; margin-bottom: 10px;">Department of Natural Resources</div> <div style="font-weight: bold;">Bureau of Land &amp; Water Resources</div>					
IF MORE SPACE IS NEEDED, USE BACK					

If well telescopes please sketch and show depths.

GROUND LEVEL

		X	

SECTION 29

Please indicate well location X.

ADDITIONAL INFORMATION

If more than one screen, show location of each on sketch.