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: Lowndes
WELL NUMBER: B-2027 | CODED:
DATE WELL COMPLETED: 7-5-00

PERMIT NUMBER:
NAME OF DRILLING FIRM: Rossi Drilling
0-509

NAME & MAILING ADDRESS OF LANDOWNER:
Larry Pegg
717 Bonnell mill rd
Caledonia, MS 39740

WELL LOCATION: SEC 12 TOWNSHIP 16 N (S) RANGE 17 E (W)

DISTANCE _____ Miles DIRECTION _____ of NEAREST TOWN _____

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 1

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	Casing Diameter (In.)	Casing Length (Ft.)
46'	4"	26'

Type of Casing	Hole Depth	Depth to Static Water Level
PVC	46'	23

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

LOG DATA

TYPE OF LOG RUN (Circle One): No Log Run, Electric, Gamma Ray, Density, Sonic, Neutron, Other (Describe) none

Name of Organization Running Log: none

GEOLOGIC DATA (Office Use Only)

Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test

Driller's Remarks

Top of Lap Pipe or Reduction in Casing _____ FEET

IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

SCREEN DATA

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

Screen Type	Depth to Bottom - Feet
PVC	20'

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Clay	0	34
Sand	34	39
Sand and gravel	39	46

FORMATIONS (Continued)	FROM	TO

RECEIVED
OCT 23 2000
Dept. of Environmental Quality
Office of Land & Water Resources

IF MORE SPACE IS NEEDED, USE BACK

If well telescopes please
sketch and show depths.

GROUND LEVEL

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

SECTION _____

Please indicate well location X.

ADDITIONAL INFORMATION