

Lowndes
6190

MISSISSIPPI DEPARTMENT OF NATURAL RESOURCES
Bureau of Land and Water Resources
Southport Mall
P.O. Box 10631
Jackson, Mississippi 39209
WATER WELL DRILLERS LOG

date well completed 19 firm name _____ county well located _____

LANDOWNER: Dr. C. Dahlke

(mailing address)

WELL LOCATION:
sec. _____ T _____ N _____ S _____ R _____ E _____ W _____
_____ miles _____ of _____ (distance) (direction) (nearest town)

WELL PURPOSE:
(home, irrigation, municipal, industrial)

- WELL COMPLETION DATA:
- (1) diameter (inches) _____
 - (2) total depth (feet) _____
 - (3) static water level (feet) _____ below above top of ground.
 - (4) casing _____ (material) _____ (depth) _____
_____ (size) if telescope see back.
 - (5) screen _____ (length) _____ (depth to top) _____
_____ (size) _____ (material)
 - (6) pump _____ (HP) _____ (yield gpm) _____
_____ (type power)
 - (7) electric log _____ (yes or no) _____
_____ (organization running log)
 - (8) how well bottom plugged _____

description of formations encountered	from	to
rock 2"	614	
gummy clay	614	618 1/2
tough formation	618 1/2	624
rock	624	625
tough formation	625	642
gummy clay	642	656
sandy clay	656	673
rock 2"	673	
sandy clay	673	683
clay's on gravel	683	710
tough formation	710	712 1/2

Handwritten notes in the table area:
712
1/2
706
700
616
5'20"
with S
top 2"
top 2"
320

DEPT. OF NATURAL RESOURCES
BUREAU OF LAND & WATER RESOURCES

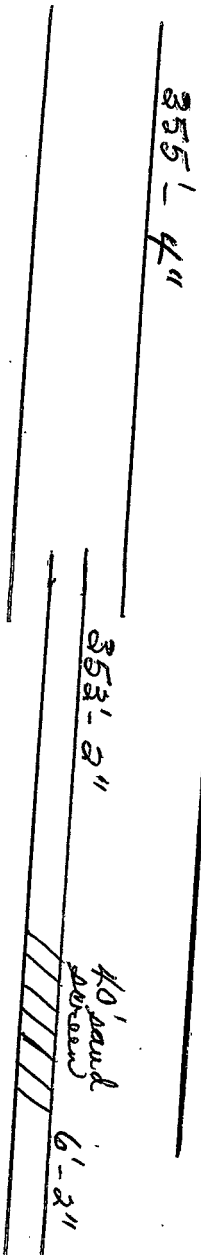
NOV - 1 - 1982

RECEIVED

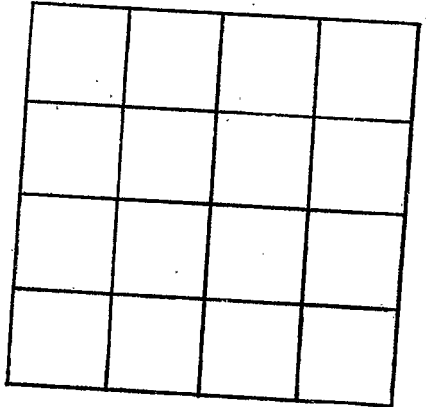
DRILLERS REMARKS: _____

If well telescopes please sketch and show depths.

GROUND LEVEL



712
 706
 6
 666



SECTION _____

Please indicate well location X.

ADDITIONAL INFORMATION

555/8
 355/7

666
 353
 313

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