

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY
Bureau of Land and Water Resources

P. O. Box 10631
Jackson, MS 39289-0631
WATER WELL DRILLERS LOG

COUNTY WELL LOCATED <i>Marion</i>	
WELL NUMBER <i>C 2019</i>	CODED
DATE WELL COMPLETED <i>7-24-92</i>	

PERMIT NUMBER <i>0-402</i>
NAME OF DRILLING FIRM <i>Tom Griffith</i>
<i>Water Well Inc.</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Robert Yates</i>		
<i>326 E. Reservoir</i>		
<i>Bunker Hill, Miss</i>		
WELL LOCATION: SEC	TOWNSHIP	RANGE
<i>21</i>	<i>5^N</i>	<i>18^E</i>
DISTANCE	DIRECTION	NEAREST TOWN
<i>2</i> Miles	<i>W</i>	<i>Bunker Hill</i>
OTHER LANDMARK		
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. <i>Home</i>		

PUMP DATA		
PUMP TYPE (Circle One): Submersible, Turbine, <u>Jet</u> Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P <u>1</u>		
Pump Capacity (GPM) <i>7</i>	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>75 FT</i>	Casing Diameter (In.) <i>2 in</i>	Casing Length (Ft.) <i>65</i>
Type of Casing <i>PVC</i>	Hole Depth <i>75 FT</i>	Depth to Static Water Level <i>45</i>
TYPE OF COMPLETION: (Circle One or More): <u>Gravel Packed</u> Underreamed, Telescoped, Natural Development, Open Hole, Other		
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>2 in</i>	Length - Feet <i>10</i>	Slot Size - Inches <i>010</i>
Screen Type <i>PVC SLOT</i>	Depth to Bottom - Feet <i>65-75</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	FORMATIONS (Continued)	FROM	TO
<i>Clay Sand</i>	<i>0</i>	<i>40</i>	DECEMBER		
	<i>40</i>	<i>75</i>			
			DEC 28 1992		
			Dept. of Environmental Quality Bureau of Land & Water Resources		
			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.