**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: Marion

WELL NUMBER: C 2037 | CODED:

DATE WELL COMPLETED: 2-9-99

PERMIT NUMBER: 0-586

NAME OF DRILLING FIRM: James Wells Water Well Ser.

NAME & MAILING ADDRESS OF LANDOWNER:
Joan Robbins
213 Williamsburg Rd.
Columbia, MS 39429

WELL LOCATION: SEC 26 TOWNSHIP 5 (N) S RANGE 18 (E) W

DISTANCE 6 Miles DIRECTION North of NEAREST TOWN Columbia

OTHER LANDMARK:

WELL PURPOSE: (Home), Irrigation, Municipal, Industrial, Fish Pond, etc.

## PUMP DATA

PUMP TYPE (Circle One): Submersible, Turbine, Jet, Flowing Well, (Other (Describe) hand pump

POWER TYPE (Circle One): Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P _____

| Pump Capacity (GPM) | No. of Stages | Setting Depth |
|---|---|---|
| | | FT. |

PUMP TEST

Well yielded 6 GPM with a drawdown of _____ ft. after _____ hours of pumping

## WELL DATA

| Well Depth | Casing Diameter (In.) | Casing Length (Ft.) |
|---|---|---|
| 85 ft. | 2 in | 75 |

| Type of Casing | Hole Depth | Depth to Static Water Level |
|---|---|---|
| PVC | 85 ft. | 55 |

TYPE OF COMPLETION: (Circle One or More): (Gravel Packed), Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) _____

WELL GROUTED TO A DEPTH OF 10 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) _____

Name of Organization Running Log

## GEOLOGIC DATA (Office Use Only)

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

Driller's Remarks

## SCREEN DATA

| Diameter - Inches | Length - Feet | Slot Size - Inches |
|---|---|---|
| 2 in | 10 | 08 |

| Screen Type | Depth to Bottom - Feet |
|---|---|
| PVC Slot | 75-85 |

Top of Lap Pipe or Reduction in Casing: FEET

IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM | TO |
|---|---|---|
| Top Soil | 0 | 2 |
| Clay | 2 | 40 |
| Sand | 40 | 85 |

| FORMATIONS (Continued) | FROM | TO |
|---|---|---|
| | | |

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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