

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
Monroe

WELL NUMBER M 2068 CODED

DATE WELL COMPLETED
2-21-96

PERMIT NUMBER
0-586

NAME OF DRILLING FIRM
James Wells
Water Well Ser.

NAME & MAILING ADDRESS OF LANDOWNER
Robin Magee
273 Peary Rd
P.O. Box 94
Columbia, Miss 39429

WELL LOCATION. SEC 6 TOWNSHIP 3 RANGE 17
 N S E W

DISTANCE 3 Miles East of 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) _____

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 _____ 15 GPM with
a drawdown of _____ ft.
after _____ hours of pumping

WELL DATA

Well Depth 160 Casing Diameter (In.) 4 in Casing Length (Ft.) 140

Type of Casing PVC Hole Depth 160 Depth to Static Water Level 105

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) _____

Name of Organization Running Log _____

SCREEN DATA

Diameter - Inches 4 in Length - Feet 20 Slot Size - Inches 08

Screen Type PVC Depth to Bottom - Feet 140-160

GEOLOGIC DATA (Office Use Only)

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

Driller's Remarks

RECEIVED

Top of Log Pipe or Reduction in Casing _____ FEET
IF TELESKOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
<u>Top Soil</u>	<u>0</u>	<u>3</u>			
<u>Clay</u>	<u>3</u>	<u>100</u>			
<u>S.S.</u>	<u>100</u>	<u>160</u>			

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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

SECTION _____

Please indicate well location X.

ADDITIONAL INFORMATION

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