

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 <u>Marion</u>	
WELL NUMBER <u>H. Owen #1</u>	CODED
DATE WELL COMPLETED <u>6-20-95</u>	

PERMIT NUMBER
NAME OF DRILLING FIRM <u>Boone's Water Well</u>

NAME & MAILING ADDRESS OF LANDOWNER <u>Morphus Bro.</u>		
<u>Robertson Drilling</u>		
<u>860 E River Place Suite #206</u>		
WELL LOCATION: SEC	TOWNSHIP	RANGE
<u>30</u>	<u>2</u>	<u>N 14 E</u>
DISTANCE	DIRECTION	NEAREST TOWN
_____ Miles	_____ of	_____
OTHER LANDMARK		
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. <u>Oil Location</u>		

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 _____		
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 <u>100</u>	Casing Diameter (In.) <u>4</u>	Casing Length (Ft.) <u>70</u>
Type of Casing <u>Dch 40</u>	Hole Depth <u>100</u>	Depth to Static Water Level

LOG DATA	
TYPE OF LOG RUN (Circle One): Electric, Gamma Ray, Density, Sonic, Neutron, Other (Describe) _____ No Log Run	
Name of Organization Running Log	

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

GEOLOGIC DATA (Office Use Only)			
Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test

WELL GROUTED TO A DEPTH OF 6 FEET
Type Grout (circle one) Cement, Bentonite, or Mix

Driller's Remarks	
<u>Set casing only</u>	
Top of Lap Pipe or Reduction in Casing	
FEET	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

SCREEN DATA		
Diameter - Inches <u>4</u>	Length - Feet <u>30</u>	Slot Size - Inches <u># 8</u>
Screen Type <u>Dch 40</u>	Depth to Bottom - Feet	

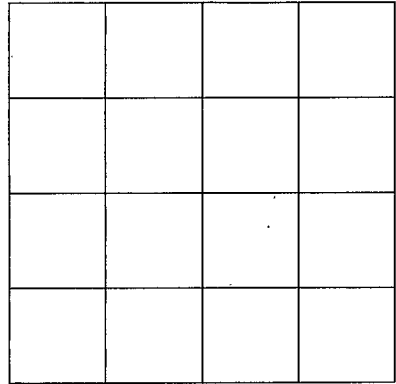
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>clay</u>	<u>0</u>	<u>12</u>
<u>sand + gravel</u>	<u>12</u>	<u>100</u>

FORMATIONS (Continued)	FROM	TO
DRILLER'S SIGNATURE		
<u>JAN 29 1996</u>		
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.