

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Office of Land and Water Resources

P. O. Box 10631  
Jackson, MS 39289-0631

WATER WELL DRILLERS LOG

*MARION* 91  
COUNTY WELL LOCATED  
*LAMAR*  
WELL NUMBER *R-43* CODED  
DATE WELL COMPLETED  
*7-24-04*

PERMIT NUMBER  
*0-0402*  
NAME OF DRILLING FIRM  
*Tom Griffith Water*  
*Well & Conductor Service*

NAME & MAILING ADDRESS OF LANDOWNER  
*DD P.O. Box 1034*  
*Ferriday, LA 71334*  
Latitude:  
Longitude:  
WELL LOCATION. SEC TOWNSHIP RANGE  
*17 1 N 17 W*  
DISTANCE DIRECTION NEAREST TOWN  
*3 Miles W of Baxterville*  
OTHER LANDMARK  
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.  
*Rig Supply Well*

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 *2*

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Clay</i>	<i>0</i>	<i>26</i>
<i>sand</i>	<i>26</i>	<i>38</i>
<i>Clay</i>	<i>38</i>	<i>120</i>
<i>sand</i>	<i>120</i>	<i>165</i>

WELL DATA  
Well Depth *165* Casing Diameter (In.) *4"* Casing Length (Ft.) *145*  
Type of Casing *PVC* Hole Depth *165* Depth to Static Water Level *60'*  
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

SCREEN DATA  
Diameter - Inches *4"* Length - Feet *20+20* Slot Size - Inches *0.10 & 0.20*  
Screen Type *std screen* Depth to Bottom - Feet \_\_\_\_\_  
Top of Lap Pipe or Reduction in Casing

RECEIVED  
AUG 20 2004  
BY: OLWR

FEET IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

I certify that the well was drilled, constructed and completed in accordance with all applicable Requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

*Tom Griffith* Per. *0-0402* *8-5-04*  
Signature of Licensed Driller and License No. Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL


SECTION \_\_\_\_\_

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth	FT.
PUMP TEST			
Well yielded <u>60</u> GPM with a drawdown of _____ ft. after _____ hours of pumping			

**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

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