

**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 <i>Marshall</i>	
WELL NUMBER <i>G-70</i>	CODED
DATE WELL COMPLETED <i>3-14-03</i>	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Frost Systems</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Adam Sanders 2719 South Slayden Rd. Slayden, MS</i>			
Latitude:			
Longitude:			
WELL LOCATION	SEC <i>17</i>	TOWNSHIP <i>2</i>	RANGE <i>N 2 E</i>
DISTANCE <i>4.5</i> Miles	DIRECTION <i>5</i>	NEAREST TOWN <i>Slayden</i>	
OTHER LANDMARK			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. <i>Home</i>			

PUMP DATA		
PUMP TYPE (Circle One): <input checked="" type="radio"/> Submersible,    Turbine,    Jet <input type="radio"/> Flowing Well, Other (Describe)		
POWER TYPE (Circle One): <input checked="" type="radio"/> Electric,    Tractor,    Diesel,    Gasoline,    Butane, Other (Describe)    H/P		
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Clay</i>	<i>0</i>	<i>23</i>
<i>sand</i>	<i>23</i>	<i>70</i>
<i>Clay</i>	<i>70</i>	<i>110</i>
<i>sand</i>	<i>110</i>	<i>185</i>
<b>RECEIVED</b>		
<b>JUN 30 2003</b>		
<b>BY: OLWR</b>		
Top of Lap Pipe or Reduction in Casing		
FEET	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE	

WELL DATA		
Well Depth <i>185</i>	Casing Diameter (In.) <i>4</i>	Casing Length (Ft.) <i>175</i>
Type of Casing <i>PVC</i>	Hole Depth <i>185</i>	Depth to Static Water Level <i>99</i>
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="radio"/> Gravel Packed, <input type="radio"/> Underreamed, <input type="radio"/> Telescoped, <input type="radio"/> Natural Development, <input type="radio"/> Open Hole, <input type="radio"/> Other (Describe)		
WELL GROUTED TO A DEPTH OF <i>10</i> FEET Type Grout (circle one): Cement, Bentonite, or Mix		

SCREEN DATA		
Diameter - Inches <i>4</i>	Length - Feet <i>10</i>	Slot Size - Inches <i>.013</i>
Screen Type <i>PVC</i>	Depth to Bottom - Feet <i>185</i>	

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.

*Bennett Ford 0217*  
Signature of Licensed Driller and License No.

*6/20/03*  
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	
20	12	120	FT.

PUMP TEST

Well yielded \_\_\_\_\_ GPM with  
a drawdown of \_\_\_\_\_ ft.  
after \_\_\_\_\_ hours of pumping

### LOG DATA

TYPE OF LOG RUN (Circle One):  
Electric, Gamma Ray, Density, Sonic, No Log Run, 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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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