

**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>Marshall</u>	
WELL NUMBER <u>H-142</u>	CODED
DATE WELL COMPLETED <u>11-25-03</u>	

PERMIT NUMBER
NAME OF DRILLING FIRM <u>MASON water wells</u>

NAME & MAILING ADDRESS OF LANDOWNER <u>Ken Hale</u> <u>63 Moore crossing South</u>			
<u>Byhalia ms 38611</u>			
Latitude: Longitude:			
WELL LOCATION	SEC <u>13</u>	TOWNSHIP <u>3 N</u>	RANGE <u>5 E</u>
DISTANCE <u>1/3</u> Miles	DIRECTION <u>S</u>	NEAREST TOWN <u>Warsaw</u>	
OTHER LANDMARK			
WELL PURPOSE <u>Home Irrigation</u> , Municipal, Industrial, Fish Pond, etc.			

PUMP DATA		
PUMP TYPE (Circle One): <u>Submersible</u> , Turbine, Jet, Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): <u>Electric</u> , Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P <u>1/2</u>		
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>clay dirt</u>	<u>0</u>	<u>15</u>
<u>white clay</u>	<u>15</u>	<u>25</u>
<u>sandy gravel</u>	<u>45</u>	<u>50</u>
<u>white sand</u>	<u>50</u>	<u>91</u>
<u>white clay</u>	<u>91</u>	<u>94</u>
<u>white sand</u>	<u>94</u>	<u>120</u>
<b>RECEIVED</b>		
<b>DEC 04 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 <u>120'</u>	Casing Diameter (In.) <u>4"</u>	Casing Length (Ft.) <u>100'</u>
Type of Casing <u>pvc</u>	Hole Depth <u>100'</u>	Depth to Static Water Level <u>48'</u>
TYPE OF COMPLETION: (Circle One or More): <u>Gravel Packed</u> , Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) _____		
WELL GROUTED TO A DEPTH OF <u>10</u> FEET Type Grout (circle one): Cement, <u>Bentonite</u> , or Mix		

**SCREEN DATA**

Diameter - Inches <u>4"</u>	Length - Feet <u>20'</u>	Slot Size - Inches <u>#10</u>
Screen Type <u>pvc</u>	Depth to Bottom - Feet <u>120'</u>	

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.

Gous W. Mason 0620  
Signature of Licensed Driller and License No.

11-26-03  
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

X			

SECTION 13

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
10	10	80 FT.

PUMP TEST

Well yielded \_\_\_\_\_ 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

1 1/2 hp - plm  
 valve well bladder  
 tank

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