

**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 <b>Marshall</b>	
WELL NUMBER <b>H-145</b>	CODED
DATE WELL COMPLETED <b>12-31-03</b>	

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

NAME & MAILING ADDRESS OF LANDOWNER <b>Joe Adkins LOT 91 Cooperwood Farms phase II Byhalia ms 38611</b>			
Latitude: Longitude:			
WELL LOCATION	SEC <b>22</b>	TOWNSHIP <b>3 N</b>	RANGE <b>5 E</b>
DISTANCE <b>114</b> Miles	DIRECTION <b>N</b>	NEAREST TOWN <b>or Wabaw rd.</b>	
OTHER LANDMARK			
WELL PURPOSE <input checked="" type="radio"/> Home, Irrigation, Municipal, Industrial, Fish Pond, etc.			

PUMP DATA		
PUMP TYPE (Circle One): <input checked="" type="radio"/> Submersible, Turbine, Jet, Flowing Well, Other (Describe)		
POWER TYPE (Circle One): <input checked="" type="radio"/> Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) <b>H/P 314</b>		
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
clay dirt	0	28
red sand	28	35
small gravel	35	50
white sand	50	80
white clay	80	90
white sand	90	155
<b>RECEIVED</b>		
<b>JAN 08 2004</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 <b>155'</b>	Casing Diameter (In.) <b>4"</b>	Casing Length (Ft.) <b>145'</b>
Type of Casing <b>pvc</b>	Hole Depth <b>155'</b>	Depth to Static Water Level <b>90'</b>
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="radio"/> Gravel Packed, Underreamed, Telescoped, <input type="radio"/> Natural Development, <input type="radio"/> Open Hole, <input type="radio"/> Other (Describe)		
WELL GROUTED TO A DEPTH OF <b>10</b> FEET Type Grout (circle one): Cement, <input checked="" type="radio"/> Bentonite, or Mix		

SCREEN DATA		
Diameter - Inches <b>4"</b>	Length - Feet <b>10'</b>	Slot Size - Inches <b>#10</b>
Screen Type <b>pvc</b>	Depth to Bottom - Feet <b>155'</b>	

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.

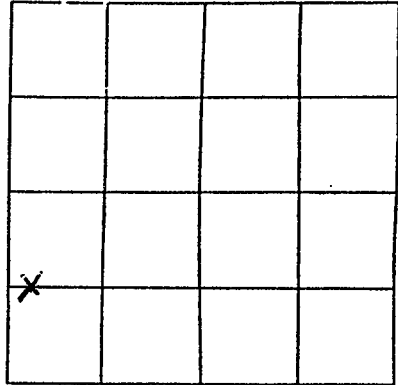
**Gene W. Mason 0-620**  
Signature of Licensed Driller and License No.

**12-31-03**  
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL



SECTION 22

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth	
12	11	120'	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

3/4 hp - wmg bladder tank.  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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