

**MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY**  
Bureau 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>J 2137</i>	CODED
DATE WELL COMPLETED <i>2-18-94</i>	

PERMIT NUMBER <b>HICKS WELL CO.</b>
NAME OF DRILLING FIRM <i>BOX 157</i> <i>OSWALD A. MS 39068</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Velma Johnson</i>		
<i>At 3 Box 279B</i>		
<i>Holly Springs MS 38635</i>		
WELL LOCATION: SEC	TOWNSHIP	RANGE
<i>23</i>	<i>3 N</i>	<i>4 E</i>
DISTANCE	DIRECTION	NEAREST TOWN
<i>6</i> Miles	<i>West</i>	<i>Holly Springs</i>
OTHER LANDMARK		
WELL PURPOSE: <input checked="" type="checkbox"/> Home, <input type="checkbox"/> Irrigation, <input type="checkbox"/> Municipal, <input type="checkbox"/> Industrial, <input type="checkbox"/> Fish Pond, etc.		

<b>PUMP DATA</b>		
PUMP TYPE (Circle One): <input checked="" type="checkbox"/> Submersible, <input type="checkbox"/> Turbine, <input type="checkbox"/> Jet, <input type="checkbox"/> Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): <input checked="" type="checkbox"/> Electric, <input type="checkbox"/> Tractor, <input type="checkbox"/> Diesel, <input type="checkbox"/> Gasoline, <input type="checkbox"/> Butane, Other (Describe) _____ H/P <i>1/2</i>		
Pump Capacity (GPM) <i>10</i>	No. of Stages	Setting Depth <i>140</i> FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

<b>WELL DATA</b>		
Well Depth <i>180'</i>	Casing Diameter (In.) <i>4"</i>	Casing Length (Ft.) <i>170'</i>
Type of Casing <i>PVC</i>	Hole Depth <i>180'</i>	Depth to Static Water Level <i>100'</i>
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped, <input type="checkbox"/> Natural Development, <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other (Describe) _____		
Top of Lap Pipe or Reduction in Casing  FEET <input type="checkbox"/> IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE		

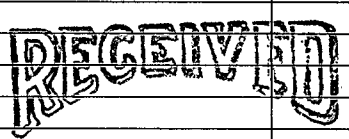
<b>LOG DATA</b>	
TYPE OF LOG RUN (Circle One): <input type="checkbox"/> No Log Run, <input type="checkbox"/> Electric, <input type="checkbox"/> Gamma Ray, <input type="checkbox"/> Density, <input type="checkbox"/> Sonic, <input type="checkbox"/> Neutron, Other (Describe) _____	
Name of Organization Running Log	

<b>SCREEN DATA</b>		
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>180'</i>	

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

Driller's Remarks

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Red Sand</i>	<i>0</i>	<i>60</i>
<i>Sand &amp; Clay</i>	<i>60</i>	<i>120</i>
<i>White Sand</i>	<i>120</i>	<i>180</i>

FORMATIONS (Continued)	FROM	TO
 <b>JUN 14 1994</b>		
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

	X		

SECTION 23

Please indicate well location X.

ADDITIONAL INFORMATION

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