

# MISSISSIPPI DEPARTMENT OF NATURAL RESOURCES

Bureau of Land and Water Resources

P.O. Box 10631

Jackson, Mississippi 39209

WATER WELL DRILLERS LOG

|  |       |
|--|-------|
| COUNTY WELL LOCATED<br><b>Marshall</b> |       |
| WELL NUMBER<br><b>K 2077</b>           | CODED |
| DATE WELL COMPLETED<br><b>7-18-90</b>  |       |

|   |
|---|
| PERMIT NUMBER<br><b>HICKS WELL CO.</b>                                |
| NAME OF DRILLING FIRM<br><b>RT. 1 BOX 157<br/>SENATOBIA, MS 38668</b> |

|   |               |                 |
|---|---------------|-----------------|
| NAME & MAILING ADDRESS OF LANDOWNER<br><b>NATHAN PAYNE</b>  |               |                 |
| <b>RT. 3</b>  |               |                 |
| <b>Holly Springs</b>  |               |                 |
| WELL LOCATION: SEC  | TOWNSHIP      | RANGE           |
| <b>25</b>   | <b>3 N</b>    | <b>3 E</b>      |
| DISTANCE  | DIRECTION     | NEAREST TOWN    |
| <b>3</b> Miles  | <b>S/E</b> of | <b>Red Bank</b> |
| 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. |               |                 |

|   |               |                |
|---|---------------|----------------|
| PUMP DATA   |               |                |
| PUMP TYPE (Circle One):<br><input checked="" type="checkbox"/> Submersible, <input type="checkbox"/> Turbine, <input type="checkbox"/> Jet, <input type="checkbox"/> Flowing Well,<br>Other (Describe) _____  |               |                |
| POWER TYPE (Circle One):<br><input checked="" type="checkbox"/> Electric, <input type="checkbox"/> Tractor, <input type="checkbox"/> Diesel, <input type="checkbox"/> Gasoline, <input type="checkbox"/> Butane,<br>Other (Describe) _____ H/P <b>3/4</b> |               |                |
| Pump Capacity (GPM)   | No. of Stages | Setting Depth  |
| <b>10</b>   | <b>12</b>     | <b>140 FT.</b> |
| PUMP TEST   |               |                |
| Well yielded <b>10</b> GPM with   |               |                |
| a drawdown of _____ ft.   |               |                |
| after _____ hours of pumping  |               |                |

|  |                                    |   |
|--|------------------------------------|---|
| WELL DATA  |                                    |   |
| Well Depth<br><b>180</b>   | Casing Diameter (In.)<br><b>4"</b> | Casing Length (Ft.)<br><b>170</b>         |
| Type of Casing<br><b>PVC</b>   | Hole Depth<br><b>180</b>           | Depth to Static Water Level<br><b>130</b> |
| TYPE OF COMPLETION: (Circle One or More):<br><input checked="" type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped,<br><input type="checkbox"/> Natural Development, <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other |                                    |   |
| Top of Lap Pipe or Reduction in Casing   |                                    |   |
| FEET <input type="checkbox"/> IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE   |                                    |   |

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

|                                |                                      |                                  |
|--------------------------------|--------------------------------------|----------------------------------|
| SCREEN DATA                    |                                      |                                  |
| Diameter - Inches<br><b>4"</b> | Length - Feet<br><b>10'</b>          | Slot Size - Inches<br><b>013</b> |
| Screen Type<br><b>PVC</b>      | Depth to Bottom - Feet<br><b>10'</b> |                                  |

|                                 |               |                |              |
|---------------------------------|---------------|----------------|--------------|
| GEOLOGIC DATA (Office Use Only) |               |                |              |
| Surface Elev.                   | Geologic Unit | Unit Thickness | Depth to Top |
| Subs. SWL                       | Date          | Analysis       | Aquifer Test |
| Driller's Remarks               |               |                |              |

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM       | TO         | FORMATIONS (Continued)   | FROM | TO |
|---------------------------------------|------------|------------|--|------|----|
| <b>R.C.</b>                           | <b>0</b>   | <b>30</b>  | <b>RECEIVED</b><br><b>AUG 28 1990</b><br><b>Department of Natural Resources</b><br><b>Bureau of Land &amp; Water Resources</b> |      |    |
| <b>RC &amp; S</b>                     | <b>30</b>  | <b>130</b> |  |      |    |
| <b>WSI</b>                            | <b>130</b> | <b>180</b> |  |      |    |
|                                       |            |            |  |      |    |
|                                       |            |            |  |      |    |
|                                       |            |            |  |      |    |
|                                       |            |            |  |      |    |
|                                       |            |            |  |      |    |
|                                       |            |            |  |      |    |
|                                       |            |            |  |      |    |

IF MORE SPACE IS NEEDED, USE BACK

If well telescopes please  
sketch and show depths.

GROUND LEVEL

|  |  |   |  |
|--|--|---|--|
|  |  | X |  |
|  |  |   |  |
|  |  |   |  |
|  |  |   |  |

SECTION \_\_\_\_\_

Please indicate well location X.

ADDITIONAL INFORMATION

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