

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>CP 2056</i> | CODED |
| DATE WELL COMPLETED <i>3-1-91</i> | |

| |
|---|
| PERMIT NUMBER |
| NAME OF DRILLING PARTY HICKS WELL CO. RT. 1 BOX 157 SENATOBIA, MS 38668 |

| | | | |
|--|---------------|----------------|-------|
| NAME & MAILING ADDRESS OF LANDOWNER <i>Sarah Rounds</i> <i>RT. 5 HOLLY SPRING</i> | | | |
| WELL LOCATION: | SEC | TOWNSHIP | RANGE |
| | | <i>4 N 3 E</i> | |
| DISTANCE | DIRECTION | NEAREST TOWN | |
| <i>6</i> Miles | <i>S/W</i> of | <i>H.S.</i> | |
| 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) _____ H/P <i>3/4</i> | | |
| Pump Capacity (GPM) <i>10</i> | No. of Stages <i>9</i> | Setting Depth <i>150</i> FT. |
| PUMP TEST | | |
| Well yielded <i>10</i> GPM with a drawdown of _____ ft. after _____ hours of pumping | | |

| | | |
|--|------------------------------------|---|
| WELL DATA | | |
| 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>120</i> |
| TYPE OF COMPLETION: (Circle One or More): <input checked="" type="radio"/> Gravel Packed, Underreamed, Telescoped, Natural Development, Open Hole, 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): No Log Run, Electric, Gamma Ray, Density, Sonic, Neutron, Other (Describe) _____ | |
| Name of Organization Running Log | |

| | | |
|--------------------------------|--------------------------------------|----------------------------------|
| 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>10'</i> | |

| | | | |
|---------------------------------|---------------|----------------|--------------|
| 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 |
|---------------------------------------|------------|------------|------------------------|------|----|
| <i>PC+S</i> | <i>0</i> | <i>40</i> | | | |
| <i>PS</i> | <i>40</i> | <i>80</i> | | | |
| <i>WS+C</i> | <i>80</i> | <i>120</i> | | | |
| <i>W.S.</i> | <i>120</i> | <i>180</i> | | | |
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RECEIVED

APR 12 1991

Dept. of Environmental Quality
Bureau of Land & Water Resources

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.