

**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>Monroe</i>		PERMIT NUMBER
WELL NUMBER <i>G-2010</i>	CODED	NAME OF DRILLING FIRM <i>Rossi Drilling</i>
DATE WELL COMPLETED <i>10-29-93</i>		<i>0-569</i>

NAME & MAILING ADDRESS OF LANDOWNER  
*Elmer Sittle*  
*315 meadowood Dr.*  
*Amory MS 38821*

WELL LOCATION: SEC *22* TOWNSHIP *135* RANGE *N 19 E*

DISTANCE *3 1/2* Miles *SW* of *Becker*

OTHER LANDMARK

WELL PURPOSE  Home, Irrigation, Municipal, Industrial, Fish Pond, etc.

**PUMP DATA**

PUMP TYPE (Circle One):  
Submersible, Turbine, Jet, Flowing Well,  
Other (Describe) \_\_\_\_\_

POWER TYPE (Circle One):  
Electric, Tractor, Diesel, Gasoline, Butane,  
Other (Describe) \_\_\_\_\_ H/P \_\_\_\_\_

Pump Capacity (GPM) \_\_\_\_\_ No. of Stages \_\_\_\_\_ Setting Depth \_\_\_\_\_ FT.

~~PUMP TEST~~  
Well yielded \_\_\_\_\_ GPM with  
a drawdown of \_\_\_\_\_ ft.  
after \_\_\_\_\_ hours of pumping

**WELL DATA**

Well Depth <i>34'</i>	Casing Diameter (In.) <i>4"</i>	Casing Length (Ft.) <i>24'</i>
Type of Casing <i>PVC</i>	Hole Depth <i>34'</i>	Depth to Static Water Level <i>16'</i>

TYPE OF COMPLETION: (Circle One or More):  
 Gravel Packed,  Underreamed,  Telescoped,  
 Natural Development,  Open Hole,  Other  
(Describe) \_\_\_\_\_

Top of Lap Pipe or Reduction in Casing  
FEET  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) *none*

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

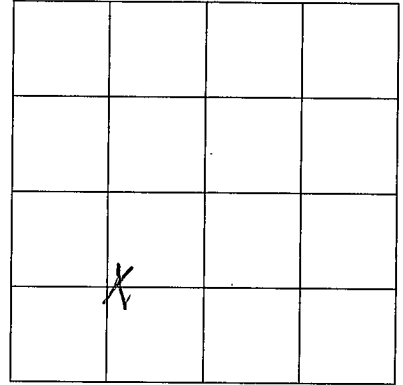
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
<i>clay sand + gravel</i>	<i>0</i>	<i>23</i>	<b>RECEIVED</b>  <b>JUN 15 1994</b>		
	<i>23</i>	<i>32</i>			

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



SECTION \_\_\_\_\_

Please indicate well location X.

ADDITIONAL INFORMATION

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