

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 <i>Newton</i>	
WELL NUMBER <i>G 2048</i>	CODED
DATE WELL COMPLETED <i>7/12/94</i>	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Mc Donalds Hill</i>
<i>Madison, Miss.</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Clifton McMullan</i> <i>Rt 1 Box 219A</i> <i>Newton, MS 39345</i>		
WELL LOCATION: SEC	TOWNSHIP	RANGE
<i>30</i>	<i>7</i>	<i>12</i>
DISTANCE DIRECTION NEAREST TOWN <i>2 1/2 Miles N of Newton</i>		
OTHER LANDMARK		
WELL PURPOSE: <input checked="" type="checkbox"/> Home Irrigation, <input type="checkbox"/> Municipal, <input type="checkbox"/> Industrial, <input type="checkbox"/> Fish Pond, etc.		

PUMP DATA		
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 _____		
Pump Capacity (GPM) <i>8</i>	No. of Stages <i>13</i>	Setting Depth <i>160</i> FT.
PUMP TEST		
Well yielded <i>25</i> GPM with a drawdown of <i>30</i> ft. after <i>4</i> hours of pumping		

WELL DATA		
Well Depth <i>310</i>	Casing Diameter (In.) <i>4"</i>	Casing Length (Ft.) <i>245</i>
Type of Casing <i>PVC</i>	Hole Depth	Depth to Static Water Level <i>130'</i>

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

WELL GROUTED TO A DEPTH OF _____ FEET
 Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA		
Diameter - Inches	Length - Feet	Slot Size - Inches
Screen Type	Depth to Bottom - Feet	

LOG DATA	
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	

GEOLOGIC DATA (Office Use Only)			
Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test
Driller's Remarks			
Top of Lap Pipe or Reduction in Casing			
FEET		IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE	

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Clay + Sand</i>	<i>0</i>	<i>18</i>
<i>Shale</i>	<i>18</i>	<i>70</i>
<i>St Course Sand</i>	<i>70</i>	<i>140</i>
<i>Coarse Sand</i>	<i>140</i>	<i>160</i>
<i>Sandy</i>	<i>160</i>	<i>170</i>
<i>Sandy St Rock</i>	<i>170</i>	<i>190</i>
<i>Shale</i>	<i>190</i>	<i>280</i>
<i>Sandy St Rock</i>	<i>280</i>	<i>285</i>
<i>St Course green</i>	<i>285</i>	<i>310</i>
<i>Sand</i>		

FORMATIONS (Continued)	FROM	TO
RECEIVED		
AUG 09 1994		
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 30

Please indicate well location X.

ADDITIONAL INFORMATION

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