

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Office of Land and Water Resources

COUNTY WELL LOCATED OKTIBBEHA	
WELL NUMBER 1	CODED
G-45	
DATE WELL COMPLETED 12-15-01	

PERMIT NUMBER
NAME OF DRILLING FIRM PARKS + PARKS WELL SERVICE
HOUSTON MS 38857

P. O. Box 10631
Jackson, MS 39289-0631
WATER WELL DRILLERS LOG

NAME & MAILING ADDRESS OF LANDOWNER STARKVILLE COUNTRY CLUB S. MONTGOMERY ST STARKVILLE MS 39760			
Latitude: Longitude:			
WELL LOCATION	SEC	TOWNSHIP	RANGE
	23	18	N 14 W
DISTANCE	DIRECTION	NEAREST TOWN	
4 Miles	SOUTH	of STARKVILLE	
OTHER LANDMARK			
WELL PURPOSE: Home, <u>Irrigation</u> , Municipal, Industrial, 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 7 1/2			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
TOP SOIL	0	6
CLAY	6	460
SAND CLAY	460	480
CLAY	480	791
SAND ROCK CLAY	791	811
SAND	811	831
SAND CLAY	831	857
SAND	857	885
SAND CLAY	885	1008
SAND SHELL	1008	1040
CLAY	1040	1130
SAND	1130	1257
GRAVEL	1257	1350
GRAVEL + CLAY	1350	1360

WELL DATA		
Well Depth 1340	Casing Diameter (In.) 4-2	Casing Length (Ft.) 1260
Type of Casing STEEL	Hole Depth 1360	Depth to Static Water Level
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) _____		

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

SCREEN DATA		
Diameter - Inches 2	Length - Feet 80	Slot Size - Inches 1.012
Screen Type SS	Depth to Bottom - Feet 1340	

RECEIVED

FEB 15 2002

BY: OLWR

Top of Lap Pipe or Reduction in Casing	FEET	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE
--	------	--

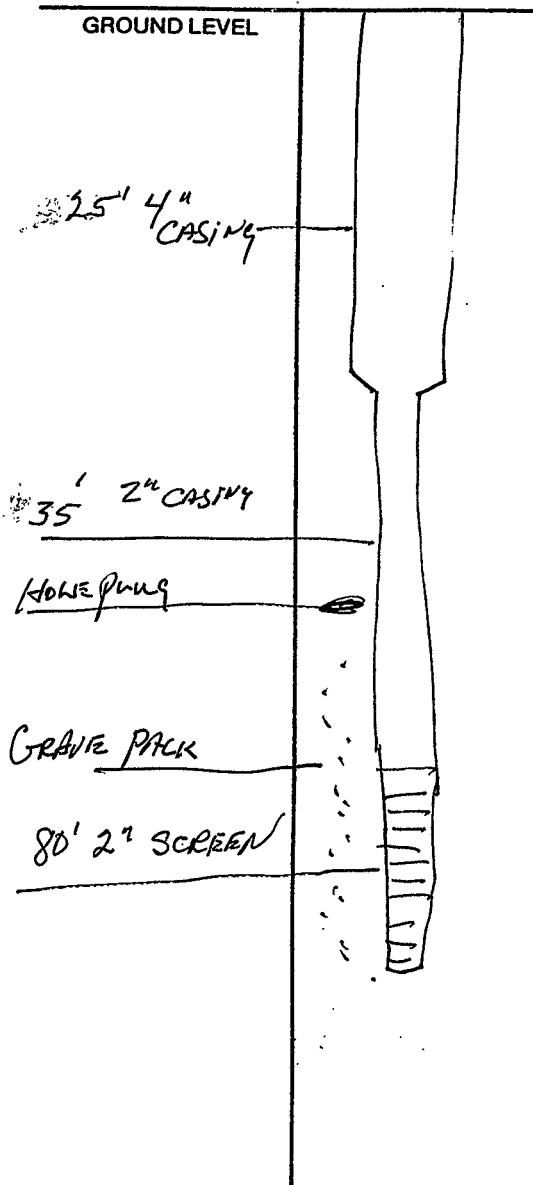
I certify that the well was drilled, constructed and completed in accordance with all applicable Requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

Ryan Park
Signature of Licensed Driller and License No.

2/1/02
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.



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

SECTION _____

Please indicate well location X.

Pump Capacity (GPM) 55	No. of Stages	Setting Depth 31.5 FT.
----------------------------------	---------------	----------------------------------

PUMP TEST

Well yielded _____ GPM with
a drawdown of _____ ft.
after _____ hours of pumping

LOG DATA

TYPE OF LOG RUN (Circle One): No Log Run, Electric, Gamma Ray, Density, Sonic, 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
