

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 PANOLA	
WELL NUMBER D-2009	CODED
DATE WELL COMPLETED 1-18-02	

PERMIT NUMBER
NAME OF DRILLING FIRM HICKS WELL CO.

NAME & MAILING ADDRESS OF LANDOWNER: INATOBIA, MS		
Robert L. Knox		
406 Blue Room Rd.		
Latitude:	Como, MS 38619	
Longitude:	38619	
WELL LOCATION	SEC TOWNSHIP RANGE	
31	6 N 5 E	
DISTANCE	DIRECTION	NEAREST TOWN
1 Miles	SW	of Glenville
OTHER LANDMARK		
WELL PURPOSE: <u>Home</u> , Irrigation, Municipal, Industrial, Fish Pond, etc.		

38668	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"/> Other (Describe)	<input type="checkbox"/> Butane,	<input type="checkbox"/> H/P	<input type="checkbox"/> _____

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Sand	0	10
Red Sand	10	60
White Sand & Clay	60	120
White Sand	120	200

WELL DATA

Well Depth 185	Casing Diameter (in.) 4	Casing Length (Ft.) 175
Type of Casing PVC	Hole Depth 200	Depth to Static Water Level 110
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 **3** FEET
Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

Diameter - Inches 4	Length - Feet 10'	Slot Size - Inches .013
Screen Type PVC Slotted	Depth to Bottom - Feet 175'	

RECEIVED

MAR 17 2002

BY: OLWR

RECEIVED


MAR 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.

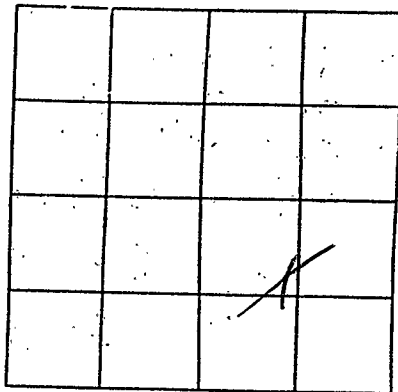
 - **0-323**
Signature of Licensed Driller and License No.

3-14-02
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL



SECTION 31

Please indicate well location X.

Pump Capacity (GPM) <u>20</u>	No. of Stages	Setting Depth <u>160</u> FT.
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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

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