

**MISSISSIPPI DEPARTMENT OF NATURAL RESOURCES**  
Bureau of Land and Water Resources

P.O. Box 10631  
Jackson, Mississippi 39209  
**WATER WELL DRILLERS LOG**

COUNTY WELL LOCATED <i>Clarksdale</i>	
WELL NUMBER <i>C-2016</i>	CODED
DATE WELL COMPLETED <i>5-4-88</i>	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>WELL COMPANY</i>
<i>RI. 1 - BOX 157</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Willie J. Jones</i> <i>Rt. 2</i> <i>Como, Ms. 38619</i>		
WELL LOCATION: SEC	TOWNSHIP	RANGE
<i>8</i>	<i>7 N</i>	<i>7 E</i>
DISTANCE	DIRECTION	NEAREST TOWN
<i>2</i> Miles	<i>SW</i> of	<i>Como</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) _____		
Pump Capacity (GPM) <i>10</i>	No. of Stages <i>9</i>	Setting Depth <i>100</i> FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

WELL DATA		
Well Depth <i>150</i>	Casing Diameter (In.) <i>4</i>	Casing Length (Ft.) <i>140</i>
Type of Casing <i>PVC</i>	Hole Depth <i>150</i>	Depth to Static Water Level <i>80</i>
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped, <input checked="" type="checkbox"/> Natural Development, <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other (Describe) _____		
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): <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	

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>→</i>	

GEOLOGIC DATA (Office Use Only)			
Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test

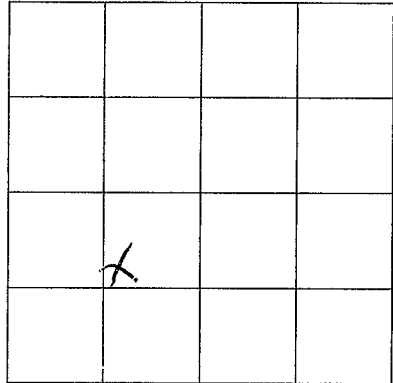
Driller's Remarks
<b>RECEIVED</b>

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	
			FROM	TO
<i>Red Clay</i>	<i>0</i>	<i>10</i>	<b>SEP 21 1988</b>	
<i>Red Sand</i>	<i>10</i>	<i>40</i>	<b>Department of Natural Resources</b>	
<i>White Sand</i>	<i>40</i>	<i>150</i>	<b>Bureau of Land &amp; Water Resources</b>	

IF MORE SPACE IS NEEDED, USE BACK

If well telescopes please  
sketch and show depths.

GROUND LEVEL



SECTION 8

Please indicate well location X.

ADDITIONAL INFORMATION

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