

**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 <u>PANOLA</u>	
WELL NUMBER <u>419</u>	CODED
DATE WELL COMPLETED <u>3-8-03</u>	

PERMIT NUMBER
NAME OF DRILLING FIRM <u>Smith Well Drilling &amp; Sew.</u>

NAME & MAILING ADDRESS OF LANDOWNER <u>TRAVIS JOHNSON</u> <u>SANDS LAKE ESTATES SANDS</u>			
Latitude:			
Longitude:			
WELL LOCATION	SEC	TOWNSHIP	RANGE
	<u>0-29</u>	<u>T-8</u>	<u>N 12-5 E</u>
DISTANCE	DIRECTION	NEAREST TOWN	
<u>6</u> Miles	<u>S/E</u>	of <u>SANDS</u>	
OTHER LANDMARK			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. <u>Home</u>			

PUMP DATA		
PUMP TYPE (Circle One): <u>Submersible</u> , Turbine, Jet, Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): <u>Electric</u> , Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P <u>34</u>		
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>TOP SOIL</u>	<u>0</u>	<u>5</u>
<u>RED SAND + CLAY</u>	<u>5</u>	<u>20</u>
<u>ROCK</u>	<u>20</u>	<u>22</u>
<u>GREY CLAY</u>	<u>22</u>	<u>90</u>
<u>FINE BROWN SAND</u>	<u>90</u>	<u>130</u>
<u>WHITE CLAY + SAND</u>	<u>130</u>	<u>170</u>
<u>WHITE SAND</u>	<u>170</u>	<u>200</u>
<b>RECEIVED</b>		
MAR 19 2003		
<b>BY: OLWR</b>		
Top of Lap Pipe or Reduction in Casing		
FEET	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE	

WELL DATA		
Well Depth <u>200</u>	Casing Diameter (In.) <u>4"</u>	Casing Length (Ft.) <u>190</u>
Type of Casing <u>PVC</u>	Hole Depth <u>200</u>	Depth to Static Water Level <u>65</u>
TYPE OF COMPLETION: (Circle One or More): Gravel Packed, Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) <u>WASHED SAND</u>		
WELL GROUTED TO A DEPTH OF <u>10</u> FEET Type Grout (circle one): <u>Cement</u> , Bentonite, or Mix		

SCREEN DATA		
Diameter - Inches <u>4"</u>	Length - Feet <u>10</u>	Slot Size - Inches <u>1/4" TYPICAL</u>
Screen Type <u>PVC</u>	Depth to Bottom - Feet <u>200</u>	

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.

Paul A. 0-645  
Signature of Licensed Driller and License No.

3-10-03  
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

		X	

SECTION 0-29

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth	FT.
<u>10</u>	<u>12</u>	<u>80</u>	

PUMP TEST

Well yielded 15 GPM with  
 a drawdown of 4 ft.  
 after 1 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

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