

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
Madison

WELL NUMBER
496

CODED
0-49

DATE WELL COMPLETED
3-30-04

PERMIT NUMBER

NAME OF DRILLING FIRM
SMITH WELL DRILLING & SERV.

NAME & MAILING ADDRESS OF LANDOWNER
WREN, DANIEL
SARNOIS LAKE ESTATES

Latitude:

Longitude:

WELL LOCATION. SEC TOWNSHIP RANGE
0-18 T-8 N R-5 E W

DISTANCE DIRECTION NEAREST TOWN
7 Miles SE of SARNOIS

OTHER LANDMARK

WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.
HOME

WELL DATA

Well Depth <u>190</u>	Casing Diameter (in.) <u>4"</u>	Casing Length (ft.) <u>170</u>
Type of Casing <u>PVC</u>	Hole Depth <u>190</u>	Depth to Static Water Level <u>122</u>

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

WELL GROUTED TO A DEPTH OF 10 FEET
Type Grout (circle one) Cement, Bentonite, or Mix

SCREEN DATA

Diameter - Inches <u>4"</u>	Length - Feet <u>20</u>	Slot Size - Inches <u>147/1005</u>
Screen Type <u>PVC</u>	Depth to Bottom - Feet <u>190</u>	

PUMP DATA

PUMP TYPE (Circle One):
Submersible Turbine, Jet, Flowing Well, Other (Describe)

POWER TYPE (Circle One):
Electric Tractor, Diesel, Gasoline, Butane, Other (Describe) H/P 3/4

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>TOP SOIL</u>	<u>0</u>	<u>10</u>
<u>SAND + GRAVEL</u>	<u>10</u>	<u>40</u>
<u>YELLOW CLAY</u>	<u>40</u>	<u>90</u>
<u>ROCK</u>	<u>90</u>	<u>91</u>
<u>GREY CLAY</u>	<u>91</u>	<u>108</u>
<u>ROCK</u>	<u>108</u>	<u>110</u>
<u>GREY CLAY</u>	<u>110</u>	<u>140</u>
<u>FINE SAND + CLAY</u>	<u>140</u>	<u>170</u>
<u>WATER BEARING SAND</u>	<u>170</u>	<u>190</u>

MAY 04 2004

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.

[Signature] 0-645
Signature of Licensed Driller and License No.

4-28-04
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

SECTION _____

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
12	11	140 FT.

PUMP TEST

Well yielded 13 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

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