

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 <i>Pearl River</i>	
WELL NUMBER <i>D 2060</i>	CODED
DATE WELL COMPLETED <i>6-23-95</i>	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Boone's Water Well</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Beatrice Felts</i> <i>Lump Pond</i>			
WELL LOCATION: SEC	TOWNSHIP	RANGE	
<i>33</i>	<i>1</i>	<i>N S 14 E</i>	
DISTANCE	DIRECTION	NEAREST TOWN	
_____ Miles	_____ of	_____	
OTHER LANDMARK			
WELL PURPOSE: <input checked="" type="checkbox"/> Home, <input type="checkbox"/> Irrigation, <input type="checkbox"/> Municipal, <input type="checkbox"/> Industrial, <input type="checkbox"/> Fish Pond, etc.			

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 _____		
Pump Capacity (GPM)	No. of Stages	Setting Depth _____ FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

WELL DATA		
Well Depth <i>90</i>	Casing Diameter (In.) <i>4</i>	Casing Length (Ft.) <i>70</i>
Type of Casing <i>#40</i>	Hole Depth	Depth to Static Water Level <i>3.5</i>

LOG DATA	
TYPE OF LOG RUN (Circle One): Electric, Gamma Ray, Density, Sonic, Neutron, Other (Describe) _____	
Name of Organization Running Log	

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			
WELL GROUTED TO A DEPTH OF <i>6</i> FEET Type Grout (circle one): <input checked="" type="checkbox"/> Cement, <input type="checkbox"/> Bentonite, or Mix			

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

SCREEN DATA			
Diameter - Inches <i>4</i>	Length - Feet <i>20</i>	Slot Size - Inches <i>#8</i>	
Screen Type <i>SCN 40</i>		Depth to Bottom - Feet	

Driller's Remarks <i>Drills set only</i>
Top of Lap Pipe or Reduction in Casing FEET <input type="checkbox"/> IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Sand</i>	<i>0</i>	<i>90</i>

FORMATIONS (Continued)	FROM	TO
RECEIVED		
JAN 29 1995		
Dept. of Environmental Quality Office of Land & Water Resources		
IF MORE SPACE IS NEEDED, USE BACK		

If well telescopes please sketch and show depths.

GROUND LEVEL

SECTION _____

Please indicate well location X.

ADDITIONAL INFORMATION

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