**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: Pearl River | |
| WELL NUMBER: D-2103 | CODED: |
| DATE WELL COMPLETED: 2-1-01 | |
| PERMIT NUMBER: | |
| NAME OF DRILLING FIRM: Bones Water Well | |

NAME & MAILING ADDRESS OF LANDOWNER
John Holder
Leetown Rd
Lumberton, MS 39455

WELL LOCATION: SEC 11 TOWNSHIP 1 N (S) RANGE 14 E (W)

DISTANCE 4 Miles DIRECTION E of NEAREST TOWN Lumberton

OTHER LANDMARK

WELL PURPOSE: Home, Irrigation, Municipal, Industrial, 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 1

| Pump Capacity (GPM) | No. of Stages | Setting Depth |
|---|---|---|
| 5 | 2 | FT. |

PUMP TEST

Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping

## WELL DATA

| Well Depth | Casing Diameter (In.) | Casing Length (Ft.) |
|---|---|---|
| 50 | 2 | 40 |

| Type of Casing | Hole Depth | Depth to Static Water Level |
|---|---|---|
| Sch 40 | 50 | 28 |

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

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

## 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

Top of Lap Pipe or Reduction in Casing
FEET — IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

## SCREEN DATA

| Diameter - Inches | Length - Feet | Slot Size - Inches |
|---|---|---|
| 2 | 10 | #8 |

| Screen Type | Depth to Bottom - Feet |
|---|---|
| Sch 40 | |

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM | TO |
|---|---|---|
| Clay | 0 | 10 |
| Sand | 10 | 50 |

| FORMATIONS (Continued) | FROM | TO |
|---|---|---|
| | | |

IF MORE SPACE IS NEEDED, USE BACK

REC'D AUG 24 2001

If well telescopes please
sketch and show depths.

GROUND LEVEL

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

SECTION _____

Please indicate well location X.

ADDITIONAL INFORMATION