

**MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY**  
Bureau 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>E</i>	CODED
<i>2063</i>	
DATE WELL COMPLETED <i>7/24/95</i>	

PERMIT NUMBER <i>0-508</i>
NAME OF DRILLING FIRM <i>Jordan Well Ser.</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Derek Williams</i> <i>Poplarville, Miss.</i>			
WELL LOCATION: SEC <i>2</i>	TOWNSHIP <i>2</i>	RANGE <i>N 19 E</i>	
DISTANCE <i>5</i> Miles	DIRECTION <i>ENE</i>	NEAREST TOWN <i>Bogalusa LA.</i>	
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): <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) _____ H/P <i>1/2</i>		
Pump Capacity (GPM) <i>10</i>	No. of Stages <i>8</i>	Setting Depth <i>90</i> FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

WELL DATA		
Well Depth <i>100</i>	Casing Diameter (In.) <i>4</i>	Casing Length (Ft.) <i>90</i>
Type of Casing <i>Pvc</i>	Hole Depth <i>100</i>	Depth to Static Water Level <i>60</i>
TYPE OF COMPLETION: (Circle One or More): Gravel Packed, Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) <i>10ft. Cement Grout</i>		
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"/> No Log Run, <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>10/12</i>
Screen Type <i>Pvc</i>	Depth to Bottom - Feet <i>90</i>	

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

Driller's Remarks

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
<i>Top Soil</i>	<i>0</i>	<i>1</i>	<b>RECEIVED</b>  <b>AUG 03 1995</b>		
<i>SANDY CLAY</i>	<i>1</i>	<i>60</i>			
<i>SAND</i>	<i>60</i>	<i>100</i>			

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

X			

SECTION 2

Please indicate well location X.

ADDITIONAL INFORMATION

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