

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
Faulkner

WELL NUMBER	CODED
<u>F-107</u>	
DATE WELL COMPLETED <u>3-5-04</u>	

PERMIT NUMBER
NAME OF DRILLING FIRM <u>Boneswater Well</u>

NAME & MAILING ADDRESS OF LANDOWNER
James Smith

28 Thunder Rd

Latitude: Poplarville, ms 39470
Longitude: Poplarville, ms 39470

WELL LOCATION	SEC	TOWNSHIP	RANGE	E
	<u>36</u>	<u>2</u>	<u>N 16</u>	<u>EM</u>

DISTANCE 7 Miles DIRECTION W of NEAREST TOWN Poplarville

OTHER LANDMARK

WELL PURPOSE (Circle One) 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

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>Clay</u>	<u>0</u>	<u>30</u>
<u>Sand</u>	<u>30</u>	<u>130</u>

RECEIVED
APR 30 2004
BY: OLW

Top of Lap Pipe or Reduction in Casing
FEET

IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE
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WELL DATA

Well Depth <u>130</u>	Casing Diameter (In.) <u>4</u>	Casing Length (Ft.) <u>110</u>
Type of Casing <u>PRESCHED</u>	Hole Depth <u>130</u>	Depth to Static Water Level <u>45</u>

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

SCREEN DATA

Diameter - inches <u>4</u>	Length - Feet <u>20</u>	Slot Size - Inches <u>#8</u>
Screen Type <u>PRESCHED</u>	Depth to Bottom - Feet	

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.

Johnny Pearson
Signature of Licensed Driller and License No. 00056

4-1-04
Date

If well telescopes please sketch and show depths.

GROUND LEVEL

SECTION _____

Please indicate well location X.

Pump Capacity (GPM) 20	No. of Stages	Setting Depth FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ 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.