

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Office of Land and Water Resources

Phone: 601-928-7537  
 P. O. Box 10631  
 Jackson, MS 39289-0631  
 WATER WELL DRILLERS LOG  
 Cell: 928-8285

COUNTY WELL LOCATED  
*Franklins*  
 WELL NUMBER  
*W-37*  
 CODED  
 DATE WELL COMPLETED  
*1-21-03*

PERMIT NUMBER  
 NAME OF DRILLING FIRM  
*Water Wells Systems*

NAME & MAILING ADDRESS OF LANDOWNER  
*Tom Lawson*  
*Seale Rd.*  
 Latitude:  
 Longitude: *Lumberton*  
 WELL LOCATION: SEC *13* TOWNSHIP *3 N* RANGE *14 E*  
 DISTANCE *15* Miles *W* of *WIGGINS*  
 OTHER LANDMARK  
 WELL PURPOSE:  Home, Irrigation, Municipal, Industrial, Fish Pond, etc.

PUMP DATA  
 PUMP TYPE (Circle One):  
 Submersible, Turbine,  Flowing Well,  
 Other (Describe)  
 POWER TYPE (Circle One):  
 Electric, Tractor, Diesel, Gasoline, Butane,  
 Other (Describe) H/P  
 DESCRIPTION OF FORMATIONS ENCOUNTERED FROM TO  

<i>Top Soil</i>	<i>0</i>	<i>3</i>
<i>7 in sand</i>	<i>3</i>	<i>80</i>
<i>Coarse sand</i>	<i>80</i>	<i>90</i>

 RECEIVED  
 FEB 06 2003  
 BY: OLWR  
 Top of Lap Pipe or Reduction in Casing  
 FEET  IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

WELL DATA

Well Depth <i>90'</i>	Casing Diameter (In.) <i>2"</i>	Casing Length (Ft.) <i>80'</i>
Type of Casing <i>PVC</i>	Hole Depth <i>60'</i>	Depth to Static Water Level

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

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

SCREEN DATA

Diameter - Inches <i>2</i>	Length - Feet <i>10'</i>	Slot Size - Inches <i>8</i>
Screen Type <i>PVC</i>	Depth to Bottom - Feet <i>90'</i>	

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.

*Frank E. Puci 432*  
 Signature of Licensed Driller and License No.

*2-4-03*  
 Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

X			

SECTION \_\_\_\_\_

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth	FT.
PUMP TEST			
Well yielded <u>10</u> GPM with a drawdown of _____ ft. after _____ hours of pumping			

LOG DATA

TYPE OF LOG RUN (Circle One):		<u>No Log Run</u>
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.