

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 <u>Pearl River</u>	
WELL NUMBER <u>N-38</u>	CODED
DATE WELL COMPLETED <u>10-20-03</u>	

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

NAME & MAILING ADDRESS OF LANDOWNER <u>Ronnie Brown</u>			
<u>181 Ronnie Brown Rd</u>			
Latitude: _____ Longitude: <u>Poplarville, MS 39470</u>			
WELL LOCATION	SEC <u>19</u>	TOWNSHIP <u>3 N</u>	RANGE <u>14 E</u>
DISTANCE <u>8</u> Miles	DIRECTION <u>SE</u>	NEAREST TOWN of <u>Poplarville</u>	
OTHER LANDMARK			
WELL PURPOSE (Circle one): <input checked="" type="radio"/> Home, <input type="radio"/> Irrigation, <input type="radio"/> Municipal, <input type="radio"/> Industrial, <input type="radio"/> 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 _____			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>clay</u>	<u>0</u>	<u>10</u>
<u>sand</u>	<u>10</u>	<u>55</u>

WELL DATA		
Well Depth <u>55</u>	Casing Diameter (In.) <u>2</u>	Casing Length (Ft.) <u>45</u>
Type of Casing <u>PERMNO</u>	Hole Depth <u>55</u>	Depth to Static Water Level <u>25</u>
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 (Describe) _____		
WELL GROUTED TO A DEPTH OF <u>10</u> FEET Type Grout (circle one): <input checked="" type="checkbox"/> Cement, <input type="checkbox"/> Bentonite, or Mix		

SCREEN DATA		
Diameter - Inches <u>2</u>	Length - Feet <u>10</u>	Slot Size - Inches <u>#8</u>
Screen Type <u>PK Screen 40</u>	Depth to Bottom - Feet	

Top of Lap Pipe or Reduction in Casing FEET	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE
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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. 0-0656

11-15-03  
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL


SECTION \_\_\_\_\_

Please indicate well location X.

Pump Capacity (GPM)	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

*Drill + set casing*

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