

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 *2128* CODED

DATE WELL COMPLETED
4-11-98

PERMIT NUMBER
0-477

NAME OF DRILLING FIRM
PENTON WELL

Nicholson MS.

NAME & MAILING ADDRESS OF LANDOWNER
Jeff Mason

203 Acola Pison Trace

Carriere, MS 39426

WELL LOCATION: SEC *15* TOWNSHIP *5 S* RANGE *16 W*

DISTANCE *6* Miles DIRECTION *E* of NEAREST TOWN *Carriere*

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 *1/2*

Pump Capacity (GPM) *10* No. of Stages *1* Setting Depth _____ FT.

PUMP TEST

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

WELL DATA

| | | |
|------------------------------|------------------------------------|--|
| Well Depth <i>745</i> | Casing Diameter (In.) <i>2"</i> | Casing Length (Ft.) <i>730'</i> |
| Type of Casing <i>PVC</i> | Hole Depth <i>745'</i> | Depth to Static Water Level <i>8'</i> |

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):
Electric, Gamma Ray, Density, Sonic, Neutron,
Other (Describe) No Log Run

Name of Organization Running Log

SCREEN DATA

| | | |
|--------------------------------|---|---------------------------------|
| Diameter - Inches <i>2"</i> | Length - Feet <i>15'</i> | Slot Size - Inches <i>10</i> |
| Screen Type <i>PVC</i> | Depth to Bottom - Feet <i>730-745'</i> | |

GEOLOGIC DATA (Office Use Only)

| | | | |
|---------------|---------------|----------------|--------------|
| Surface Elev. | Geologic Unit | Unit Thickness | Depth to Top |
| Subs. SWL | Date | Analysis | Aquifer Test |

Driller's Remarks

07-09-98A03:58 RCVD

Top of Lap Pipe or Reduction in Casing _____ FEET

IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM | TO | FORMATIONS (Continued) | FROM | TO |
|---------------------------------------|------------|------------|------------------------|------|----|
| <i>Clay</i> | <i>0</i> | <i>12</i> | | | |
| <i>Sand</i> | <i>12</i> | <i>35</i> | | | |
| <i>Clay</i> | <i>35</i> | <i>400</i> | | | |
| <i>Sand</i> | <i>400</i> | <i>485</i> | | | |
| <i>Clay</i> | <i>485</i> | <i>690</i> | | | |
| <i>Sand</i> | <i>690</i> | <i>745</i> | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

IF MORE SPACE IS NEEDED, USE BACK

If well telescopes please sketch and show depths.

GROUND LEVEL

| | | | |
|--|--|---|--|
| | | | |
| | | X | |
| | | | |
| | | | |

SECTION 15

Please indicate well location X.

ADDITIONAL INFORMATION

*OFF
Anchor Lake Rd.*

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