

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 W-235 CODED

DATE WELL COMPLETED
1-31-03

PERMIT NUMBER
0519

NAME OF DRILLING FIRM
BORGE WELLSERVE

NAME & MAILING ADDRESS OF LANDOWNER
HORRESTAWART AT CORNER
OFF LIBERTY R.P. AROUND BOARD R.P.

Latitude:
Longitude:

WELL LOCATION. SEC 8 TOWNSHIP 6 RANGE 17 W

DISTANCE 3 Miles DIRECTION NORTH of NEAREST TOWN PEARL RIVER

OTHER LANDMARK
PEARL RIVER

WELL PURPOSE 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>BLACK SLT</u>	<u>0</u>	<u>6</u>
<u>WHITE CLAY</u>	<u>6</u>	<u>12</u>
<u>SAND</u>	<u>12</u>	<u>20</u>
<u>RED CLAY</u>	<u>20</u>	<u>30</u>
<u>SAND</u>	<u>30</u>	<u>45</u>
<u>ROCK</u>	<u>45</u>	<u>65</u>
<u>BLUE CLAY</u>	<u>65</u>	<u>105</u>
<u>SAND</u>	<u>105</u>	<u>125</u>
<u>CLAY</u>	<u>125</u>	<u>220</u>
<u>ROCK LAYER</u>	<u>220</u>	<u>240</u>
<u>CLAY</u>	<u>240</u>	<u>260</u>
<u>SAND</u>	<u>260</u>	<u>310</u>

WELL DATA

Well Depth <u>310'</u>	Casing Diameter (In.) <u>4 1/2</u>	Casing Length (Ft.) <u>310'</u>
Type of Casing <u>PVC</u>	Hole Depth <u>310</u>	Depth to Static Water Level <u>25'</u>

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

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

SCREEN DATA

Diameter - Inches <u>2</u>	Length - Feet <u>20'</u>	Slot Size - Inches <u>#10</u>
Screen Type <u>J-WRAP</u>	Depth to Bottom - Feet <u>310</u>	

RECEIVED

FEB 05 2003

BY: OLWR

Top of Lap Pipe or Reduction in Casing

FEET IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

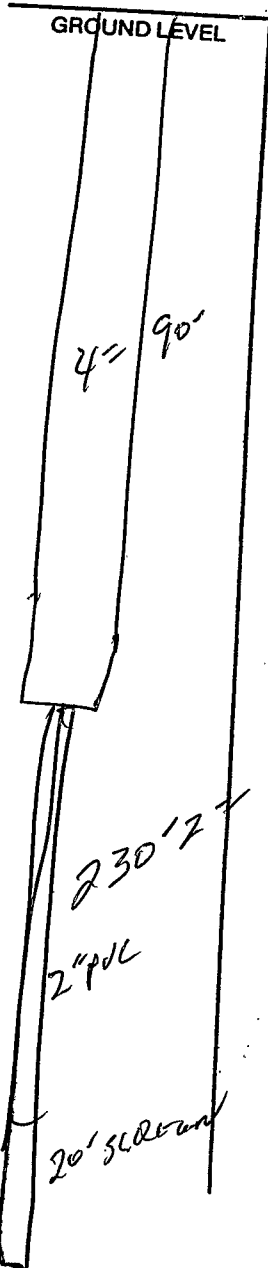
I certify that the well was drilled, constructed and completed in accordance with all applicable Requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

John R. Byr
Signature of Licensed Driller and License No.

2-2-03
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.



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

X			

SECTION _____

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
20	2	85 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
