

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY
Bureau of Land and Water Resources

P. O. Box 10631
Jackson, MS 39289-0631

WATER WELL DRILLERS LOG

COUNTY WELL LOCATED Perry		PERMIT NUMBER
WELL NUMBER #1	CODED <input checked="" type="checkbox"/>	
NAME OF DRILLING FIRM Exiner Drilling Service Inc.		DATE WELL COMPLETED 9-29-96
B 82		

NAME & MAILING ADDRESS OF LANDOWNER
Chesley Pouet Drilling

P.O. BOX 447

Laurel, MS 3944-0447

WELL LOCATION: SEC **4** TOWNSHIP **5** RANGE **10**
NWSW S EW

DISTANCE _____ Miles _____ of _____

DIRECTION _____ NEAREST TOWN _____

OTHER LANDMARK
S of Perry & Jones Co Line

WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.
Oilfield Rtg SUPPLY

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 **7/2**

Pump Capacity (GPM) 80	No. of Stages	Setting Depth 147 FT.
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PUMP TEST

Well yielded **80** GPM with
a drawdown of _____ ft.
after _____ hours of pumping

WELL DATA

Well Depth 395	Casing Diameter (In.) 4"	Casing Length (Ft.) 365
Type of Casing PVC	Hole Depth 435	Depth to Static Water Level 45'

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

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

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

SCREEN DATA

Diameter - Inches 4	Length - Feet 30	Slot Size - Inches 10/10
Screen Type PVC	Depth to Bottom - Feet 395	

A patch cor. 4-12-#1

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
SAND	0	50
Clay & Sand	50	340
SAND	340	395
Clay	395	435

Driller's Remarks

FORMATIONS (Continued) FROM _____ TO _____

RECEIVED

OCT 08 1996

**Dept. of Environmental Quality
Office of Land & Water Resources**

IF MORE SPACE IS NEEDED, USE BACK

If well telescopes please
sketch and show depths.

GROUND LEVEL

SECTION _____

Please indicate well location X.

ADDITIONAL INFORMATION

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