

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
Perry

WELL NUMBER B-88 CODED 3-1204

DATE WELL COMPLETED 3-12-04

PERMIT NUMBER

NAME OF DRILLING FIRM
J&S Water Well

NAME & MAILING ADDRESS OF LANDOWNER
David Boyd

419 I Whitfield Rd.

Latitude:
Longitude: Overt, MS 39464

WELL LOCATION: SEC 17 TOWNSHIP 5 N RANGE 10 W

DISTANCE 6 Miles DIRECTION NE of NEAREST TOWN Runnetstown

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

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
damp	0	12
Clay	12	280
damp	280	330

WELL DATA

Well Depth 330	Casing Diameter (In.) 4	Casing Length (Ft.) 310
Type of Casing sch 40	Hole Depth	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 DEPTH OF 10 FEET
 Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

Diameter - Inches 4	Length - Feet 20	Slot Size - Inches 8
Screen Type Sch 40	Depth to Bottom - Feet	

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

RECEIVED
 MAR 17 2004
 BY: OLWR

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 Stone 0-514
 Signature of Licensed Driller and License No.

3-11-04
 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.
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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

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