

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 <i>Prc</i>	
WELL NUMBER <i>C 2134</i>	CODED
DATE WELL COMPLETED <i>7-16-98</i>	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Fitzgerald well</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Jimmy Wells</i>			
<i>Jayess ms.</i>			
<i>Lee Morgan Rd.</i>			
WELL LOCATION:	SEC <i>3</i>	TOWNSHIP <i>4</i>	RANGE <i>N 9 E</i>
DISTANCE <i>10</i> Miles	DIRECTION <i>NE</i>	NEAREST TOWN <i>McComb</i>	
OTHER LANDMARK			
WELL PURPOSE: <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): <input checked="" type="radio"/> Submersible, <input type="radio"/> Turbine, <input type="radio"/> Jet, <input type="radio"/> Flowing Well, Other (Describe) _____			
POWER TYPE (Circle One): <input checked="" type="radio"/> Electric, <input type="radio"/> Tractor, <input type="radio"/> Diesel, <input type="radio"/> Gasoline, <input type="radio"/> Butane, Other (Describe) _____ H/P <i>12</i>			
Pump Capacity (GPM) <i>12</i>	No. of Stages <i>9</i>	Setting Depth <i>100</i> FT.	
PUMP TEST			
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping			

WELL DATA		
Well Depth <i>128'</i>	Casing Diameter (In.) <i>4"</i>	Casing Length (Ft.) <i>118'</i>
Type of Casing <i>Prc</i>	Hole Depth <i>128'</i>	Depth to Static Water Level <i>68'</i>
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="radio"/> Gravel Packed, <input type="radio"/> Underreamed, <input type="radio"/> Telescoped, <input type="radio"/> Natural Development, <input type="radio"/> Open Hole, <input type="radio"/> Other		
WELL GROUTED TO A DEPTH OF <i>10</i> FEET Type Grout (circle one): Cement, Bentonite, <input checked="" type="radio"/> Mix		

LOG DATA	
TYPE OF LOG RUN (Circle One): <input checked="" type="radio"/> No Log Run, <input type="radio"/> Electric, <input type="radio"/> Gamma Ray, <input type="radio"/> Density, <input type="radio"/> Sonic, <input type="radio"/> Neutron, Other (Describe) _____	
Name of Organization Running Log	

SCREEN DATA		
Diameter - Inches <i>4"</i>	Length - Feet <i>10</i>	Slot Size - Inches <i>.012</i>
Screen Type <i>Prc</i>	Depth to Bottom - Feet <i>128'</i>	

GEOLOGIC DATA (Office Use Only)			
Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test
Driller's Remarks			
Top of Lap Pipe or Reduction in Casing			
FEET <input type="checkbox"/> IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
<i>Top soil.</i>	<i>0</i>	<i>5</i>			
<i>clay</i>	<i>5</i>	<i>40</i>			
<i>gravel</i>	<i>40</i>	<i>60</i>			
<i>sand</i>	<i>60</i>	<i>80</i>			
<i>clay</i>	<i>80</i>	<i>90</i>			
<i>sand</i>	<i>90</i>	<i>110</i>			
<i>course sand + gravel</i>	<i>110</i>	<i>128</i>			

IF MORE SPACE IS NEEDED, USE BACK

If well telescopes please
sketch and show depths.

GROUND LEVEL

	X		

SECTION _____

Please indicate well location X.

ADDITIONAL INFORMATION

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