

**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>Pike</i>	
WELL NUMBER <i>L-124</i>	CODED
DATE WELL COMPLETED <i>11-5-9-03</i>	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Fitzgerald Well Service</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Thomas Crosley</i>			
<i>Taylor Rd</i>			
Latitude:			
Longitude:			
WELL LOCATION	SEC <i>17</i>	TOWNSHIP <i>1 N</i>	RANGE <i>8 E</i>
DISTANCE <i>5</i> Miles	DIRECTION <i>NE</i>	NEAREST TOWN <i>Osyka</i>	
OTHER LANDMARK			
WELL PURPOSE: <input checked="" type="radio"/> Home Irrigation, Municipal, Industrial, Fish Pond, etc.			

<b>PUMP DATA</b>			
PUMP TYPE (Circle One): <input checked="" type="radio"/> Submersible, Turbine, Jet, Flowing Well, Other (Describe) _____			
POWER TYPE (Circle One): <input checked="" type="radio"/> Electric, Tractor, Diesel, Gasoline, <i>1/2</i> Butane, Other (Describe) _____ H/P <i>1/2</i>			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>clay</i>	<i>0</i>	<i>20</i>
<i>sand &amp; gravel</i>	<i>20</i>	<i>60</i>
<i>clay</i>	<i>60</i>	<i>80</i>
<i>sand</i>	<i>80</i>	<i>110</i>
<i>course sand</i>	<i>110</i>	<i>130</i>

**WELL DATA**

Well Depth <i>130</i>	Casing Diameter (In.) <i>4"</i>	Casing Length (Ft.) <i>120'</i>
Type of Casing <i>PVC</i>	Hole Depth <i>130'</i>	Depth to Static Water Level <i>34'</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

**SCREEN DATA**

Diameter - Inches <i>4"</i>	Length - Feet <i>10'</i>	Slot Size - Inches <i>.012</i>
Screen Type <i>PVC</i>	Depth to Bottom - Feet <i>130'</i>	

**RECEIVED**

**OCT 09 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.

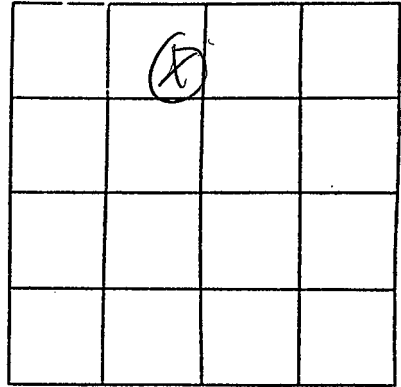
*Brod Fitzgerald* *024*  
 Signature of Licensed Driller and License No.

*10-1-03*  
 Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL



SECTION 17

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
12	8	75' 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

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