

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>27</i>	CODED
DATE WELL COMPLETED <i>3-2-02</i>	

PERMIT NUMBER <i>079</i>
NAME OF DRILLING FIRM <i>Reaves Well Serv</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Kenneth Magee</i>			
<i>Pumping Station Rd</i>			
Latitude:			
Longitude:			
WELL LOCATION	SEC	TOWNSHIP	RANGE
	<i>18</i>	<i>1</i>	<i>N 9 W</i>
DISTANCE	DIRECTION	NEAREST TOWN	
<i>12</i> Miles	<i>NE</i>	of <i>OSYKA</i>	
OTHER LANDMARK			
WELL PURPOSE: <u>Home</u> , 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 *2*

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Drift & sand</i>	<i>0</i>	<i>20</i>
<i>Sand & Red clay</i>	<i>20</i>	<i>40</i>
<i>Sand</i>	<i>40</i>	<i>80</i>
<i>Sand & pee gravel</i>	<i>80</i>	<i>110</i>

WELL DATA

Well Depth <i>110'</i>	Casing Diameter (In.) <i>4"</i>	Casing Length (Ft.) <i>20'</i>
Type of Casing <i>pvc</i>	Hole Depth <i>110'</i>	Depth to Static Water Level <i>70'</i>
TYPE OF COMPLETION: (Circle One or More): <input type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped, <input type="checkbox"/> Natural Development, <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other (Describe) <i>to gal sand</i>		
WELL GROUTED TO A DEPTH OF <i>10</i> FEET Type Grout (circle one): <u>Cement</u> , Bentonite, or Mix		

SCREEN DATA

Diameter - Inches <i>4"</i>	Length - Feet <i>10'</i>	Slot Size - Inches <i>10 slot</i>
Screen Type <i>pvc</i>	Depth to Bottom - Feet <i>110'</i>	

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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.

Jimmy Reaves 0668
 Signature of Licensed Driller and License No.

3-14-02
 Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

	X		

SECTION 18

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
		100' FT.

PUMP TEST

Well yielded 50 GPM with
a drawdown of 0 ft.
after 1 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.