

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
Scott

WELL NUMBER CODED
D-38

DATE WELL COMPLETED
1-30-03

PERMIT NUMBER

NAME OF DRILLING FIRM
Thomas Drilling

NAME & MAILING ADDRESS OF LANDOWNER
David Sharp
359 Robert Butler Rd

Latitude:
Longitude: *Forest MS 39094*

WELL LOCATION. SEC TOWNSHIP RANGE
30 8^N 9^W

DISTANCE DIRECTION NEAREST TOWN
1/2 Miles N of Steele

OTHER LANDMARK
1 mile SW of South Canal

WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.
Poultry

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>Dirt & Clay</i>	<i>0</i>	<i>3</i>
<i>Sandy Clay</i>	<i>3</i>	<i>11</i>
<i>SAND</i>	<i>11</i>	<i>61</i>
<i>Rock Gray Clay</i>	<i>61</i>	<i>130</i>
<i>GRAY CLAY w/ Rock</i>	<i>131</i>	<i>170</i>
<i>Rock</i>	<i>170</i>	<i>171</i>
<i>GRAY CLAY w/ silt SAND</i>	<i>171</i>	<i>265</i>
<i>FINE SAND GRAY</i>	<i>265</i>	<i>285</i>
<i>CLAY & SAND</i>	<i>285</i>	<i>310</i>
<i>FINE GRAY SAND</i>	<i>310</i>	<i>323</i>
<i>GRAY CLAY</i>	<i>323</i>	<i>329</i>
<i>GRAY SAND</i>	<i>329</i>	<i>360</i>

WELL DATA

Well Depth Casing Diameter (In.) Casing Length (Ft.)
360 4" 370'

Type of Casing Hole Depth Depth to Static Water Level
PVC 360' 171

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 Length - Feet Slot Size - inches
4" 20' .010

Screen Type Depth to Bottom - Feet
PVC sanded 360

RECEIVED

FEB 18 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.

David G. Murray *0-147* *1-30-03*
Signature of Licensed Driller and License No. Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

		X	

SECTION 30

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth	
<u>19</u>	<u>16</u>	<u>220'</u>	FT.

PUMP TEST

Well yielded 25 GPM with
a drawdown of 5 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.