

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 842204	CODED
N-210	
DATE WELL COMPLETED 8-6-03	

PERMIT NUMBER
NAME OF DRILLING FIRM Easley Waterwell

NAME & MAILING ADDRESS OF LANDOWNER JD Howard Collins Rd 427 Collins Rd Telaatche MS			
Latitude:	39145		
Longitude:			
WELL LOCATION.	SEC 7	TOWNSHIP 5	RANGE 6
		(N)	(E)
DISTANCE	DIRECTION	NEAREST TOWN	
Miles	of		
OTHER LANDMARK			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. Chicken House			

PUMP DATA			
PUMP TYPE (Circle One): <u>Submersible</u> Turbine, Jet, Flowing Well, Other (Describe)			
POWER TYPE (Circle One): <u>Electric</u> Tractor, Diesel, Gasoline, Butane, Other (Describe) H/P 5			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
CLAY	0	20
Strippy Sand & Clay	20	85
CLAY	85	425
Sand	425-445	445
CLAY	465	475
Strippy Sand & Clay	475	650
Sand	650	725
CLAY	725	780

WELL DATA		
Well Depth 724'	Casing Diameter (In.) 4"	Casing Length (Ft.) 684'
Type of Casing PVC	Hole Depth 780'	Depth to Static Water Level
TYPE OF COMPLETION: (Circle One or More): Gravel Packed, Underreamed, Telescoped, <u>Natural Development</u> , 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 40'	Slot Size - Inches 006"
Screen Type PVC	Depth to Bottom - Feet 724'	

RECEIVED	
FEB 11 2004	
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.

Larry Easley 510
Signature of Licensed Driller and License No.

8-6-03
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.
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.