

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>Sharkey Co.</i>	
WELL NUMBER <i>C-143</i>	CODED
DATE WELL COMPLETED <i>11-5-03</i>	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Schudco Ltd</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Alps Plantation Allen Allen MS 38744</i>		
Latitude: <i>33° 00' 25" N 07</i> Longitude: <i>090° 55' 33" W 54 44</i>		
WELL LOCATION	SEC ^{of} TOWNSHIP RANGE	
<i>SW/1W</i>	<i>3 13 N 7 W</i>	
DISTANCE	DIRECTION	NEAREST TOWN
<i>4 1/2</i> Miles	<i>East</i>	<i>Grace</i>
OTHER LANDMARK		
WELL PURPOSE: Home, <u>Irrigation</u> , Municipal, Industrial, Fish Pond, etc.		

PUMP DATA	
PUMP TYPE (Circle One): Submersible, <u>Turbine</u> , Jet	Flowing Well.
POWER TYPE (Circle One): Electric, Tractor, <u>Diesel</u> , Gasoline, Butane, Other (Describe) _____ H/P <u>10</u>	

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Clay</i>	<i>0</i>	<i>15</i>
<i>fine to med</i>	<i>15</i>	<i>40</i>
<i>med to coarse sand</i>	<i>40</i>	<i>66</i>
<i>course sand, gravel & gravel</i>	<i>66</i>	<i>115</i>

WELL DATA		
Well Depth <i>115</i>	Casing Diameter (In.) <i>16</i>	Casing Length (Ft.) <i>75</i>
Type of Casing <i>pvc</i>	Hole Depth <i>118</i>	Depth to Static Water Level <i>18 ft</i>
TYPE OF COMPLETION: (Circle One or More): <u>Gravel Packed</u> , Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) _____		

WELL GROUTED TO A DEPTH OF <u>10</u> FEET
Type Grout (circle one): <u>Cement</u> , Bentonite, or Mix

SCREEN DATA		
Diameter - Inches <i>16</i>	Length - Feet <i>40</i>	Slot Size - Inches <i>.035</i>
Screen Type <i>pvc</i>	Depth to Bottom - Feet <i>115</i>	

RECEIVED

NOV 21 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.

Charles M. Nichols
Signature of Licensed Driller and License No.

11-17-03
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

x			

SECTION 3

Please indicate well location X.

Pump Capacity (GPM) <u>2500</u>	No. of Stages <u>2</u>	Setting Depth <u>60</u> FT.
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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.