

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  
*Simpson*

WELL NUMBER  
*#1*

CODED

*B-66*

DATE WELL COMPLETED  
*8-14-03*

PERMIT NUMBER

NAME OF DRILLING FIRM  
*Harold Fratcher Sr*

*Water Well Service*

NAME & MAILING ADDRESS OF LANDOWNER  
*Jobie Smith*  
*360 Braswell Rd*  
*Horenew, MS*

Latitude:  
Longitude:

WELL LOCATION. SEC TOWNSHIP RANGE  
*B 2 N 2 E*

DISTANCE DIRECTION NEAREST TOWN

Miles of

OTHER LANDMARK

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

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 *1.0*

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM       | TO         |
|---------------------------------------|------------|------------|
| <i>Red sand</i>                       | <i>0</i>   | <i>10</i>  |
| <i>Clay</i>                           | <i>10</i>  | <i>230</i> |
| <i>sand</i>                           | <i>230</i> | <i>260</i> |
| <i>clay</i>                           | <i>260</i> | <i>265</i> |
|                                       |            |            |
|                                       |            |            |
|                                       |            |            |
|                                       |            |            |
|                                       |            |            |
|                                       |            |            |
|                                       |            |            |
|                                       |            |            |
|                                       |            |            |
|                                       |            |            |
|                                       |            |            |

RECEIVED

SEP 24 2003

BY: OLWR

Top of Lap Pipe or Reduction in Casing

FEET IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

WELL DATA

|                              |                                    |  |
|------------------------------|------------------------------------|--|
| Well Depth<br><i>260</i>     | Casing Diameter (In.)<br><i>4"</i> | Casing Length (Ft.)<br><i>240</i>        |
| Type of Casing<br><i>PUC</i> | Hole Depth<br><i>268</i>           | Depth to Static Water Level<br><i>84</i> |

TYPE OF COMPLETION: (Circle One or More):  
 Gravel Packed,  Underreamed,  Telescoped,  
 Natural Development,  Open Hole,  Other  
(Describe) \_\_\_\_\_

WELL GROUTED TO A DEPTH OF *20* FEET  
Type Grout (circle one)  Cement  Bentonite, or Mix

SCREEN DATA

|                               |                                      |                                   |
|-------------------------------|--------------------------------------|-----------------------------------|
| Diameter - Inches<br><i>4</i> | Length - Feet<br><i>20</i>           | Slot Size - Inches<br><i>0.08</i> |
| Screen Type<br><i>PUC</i>     | Depth to Bottom - Feet<br><i>260</i> |                                   |

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.

*Harold Fratcher Sr 0598*  
Signature of Licensed Driller and License No.

*9-14-03*  
Date

If well telescopes please sketch and show depths.

GROUND LEVEL

|  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

SECTION \_\_\_\_\_

Please indicate well location X.

| Pump Capacity (GPM) | No. of Stages | Setting Depth |
|---------------------|---------------|---------------|
| 12                  | 10            | 180 FT.       |

PUMP TEST

Well yielded 15 GPM with  
 a drawdown of 30 ft.  
 after 8 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

State Loggers

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.