

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Office of Land and Water Resources

COUNTY WELL LOCATED  
Stone

WELL NUMBER  
A-37

CODED

PERMIT NUMBER

DATE WELL COMPLETED  
7-29-03

NAME OF DRILLING FIRM  
Moores Water Well Serv.

31 R Moore Rd, Wiggins MS

P. O. Box 10631  
Jackson, MS 39289-0631  
WATER WELL DRILLERS LOG

NAME & MAILING ADDRESS OF LANDOWNER  
James L. Hill

135 Goodhill Rd, Perkins Stone

Latitude:  
Longitude:

WELL LOCATION: SEC 26 TOWNSHIP 2 RANGE 13 W

DISTANCE 5 Miles DIRECTION SW of NEAREST TOWN Wiggins

OTHER LANDMARK  
Magnolia Com.

WELL PURPOSE: Home, 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 1

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>topsoil</u>	<u>1'</u>	<u>2'</u>
<u>red sandy clay</u>	<u>2'</u>	<u>20'</u>
<u>white sand</u>	<u>20'</u>	<u>40'</u>
<u>Blues oapstone</u>	<u>40'</u>	<u>80'</u>
<u>Brown sapstone</u>	<u>80'</u>	<u>140'</u>
<u>white coarsesand</u>	<u>140'</u>	<u>170'</u>

WELL DATA

Well Depth <u>170'</u>	Casing Diameter (In.) <u>2"</u>	Casing Length (Ft.) <u>160'</u>
Type of Casing <u>PVC</u>	Hole Depth <u>2"</u>	Depth to Static Water Level <u>66'</u>

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 <u>2"</u>	Length - Feet <u>10'</u>	Slot Size - Inches <u>.08</u>
Screen Type <u>PVCsch 40</u>	Depth to Bottom - Feet <u>170'</u>	

RECEIVED

AUG 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.

Cornell Ray Moore 0-0533  
Signature of Licensed Driller and License No.

8-17-03  
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
8	2	_____ 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.