

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	
Stone	
WELL NUMBER	CODED
A-4a	
DATE WELL COMPLETED	
5-11-04	

PERMIT NUMBER
NAME OF DRILLING FIRM
Bodnes Waterwell

NAME & MAILING ADDRESS OF LANDOWNER		
Ken Blanchard		
113 Red Hill Church Rd		
Latitude:	Longitude: Lumberton, MS 39455	
WELL LOCATION		
SEC	TOWNSHIP	RANGE
30	2 N	13 E
DISTANCE DIRECTION NEAREST TOWN		
8 Miles	W	of Wiggins
OTHER LANDMARK		
WELL PURPOSE: <input checked="" type="checkbox"/> Irrigation, <input type="checkbox"/> Municipal, <input type="checkbox"/> Industrial, <input type="checkbox"/> Fish Pond, etc.		

PUMP DATA		
PUMP TYPE (Circle One):		
<input checked="" type="checkbox"/> Submersible,	<input type="checkbox"/> Turbine,	<input type="checkbox"/> Jet
<input type="checkbox"/> Other (Describe)	<input type="checkbox"/> Flowing Well,	
POWER TYPE (Circle One):		
<input checked="" type="checkbox"/> Electric,	<input type="checkbox"/> Tractor,	<input type="checkbox"/> Diesel,
<input type="checkbox"/> Other (Describe)	<input type="checkbox"/> Gasoline, <input type="checkbox"/> Butane,	
	H/P	1
DESCRIPTION OF FORMATIONS ENCOUNTERED		FROM TO
Clay		0 10
sand & gravel		10 140
RECEIVED		
JUN 17 2004		
BY: OLIVE		
Top of Lap Pipe or Reduction in Casing		
FEET	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE	

WELL DATA

Well Depth	Casing Diameter (In.)	Casing Length (Ft.)
140	4	120
Type of Casing	Hole Depth	Depth to Static Water Level
PC SCH 40	140	75
TYPE OF COMPLETION: (Circle One or More):		
<input type="checkbox"/> Gravel Packed,	<input type="checkbox"/> Underreamed,	<input type="checkbox"/> Telescoped,
<input type="checkbox"/> Natural Development,	<input type="checkbox"/> Open Hole,	<input type="checkbox"/> Other
(Describe)		
WELL GROUTED TO A DEPTH OF _____ FEET		
Type Grout (circle one): Cement, Bentonite, or Mix		

SCREEN DATA

Diameter - Inches	Length - Feet	Slot Size - Inches
4	20	#8
Screen Type	Depth to Bottom - Feet	
PC SCH 40		

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.

Signature of Licensed Driller and License No.
 Johnny Pearson
 00056

10-15-04
 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) <i>20</i>	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.