

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 <u>Stone</u> | |
| WELL NUMBER <u>C-2132</u> | CODED |
| DATE WELL COMPLETED <u>10-5-99</u> | |

| |
|--|
| PERMIT NUMBER |
| NAME OF DRILLING FIRM <u>Boones Waterwell</u> |

| | | | |
|--|--------------------------|--------------------------------|------------------------|
| NAME & MAILING ADDRESS OF LANDOWNER <u>Jeff White</u> | | | |
| <u>3657 Hwy 26</u> | | | |
| <u>Wiggins MS 39577</u> | | | |
| WELL LOCATION: | SEC <u>25</u> | TOWNSHIP <u>2</u> | RANGE <u>N 11 E</u> |
| DISTANCE <u>8</u> | DIRECTION <u>East</u> | NEAREST TOWN <u>Wiggins</u> | |
| OTHER LANDMARK | | | |
| WELL PURPOSE: <input checked="" type="checkbox"/> Home 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"/> Flowing Well, Other (Describe) _____ | | | |
| POWER TYPE (Circle One): <input checked="" type="checkbox"/> Electric, <input type="checkbox"/> Tractor, <input type="checkbox"/> Diesel, <input type="checkbox"/> Gasoline, <input type="checkbox"/> Butane, Other (Describe) _____ H/P <u>2</u> | | | |
| Pump Capacity (GPM) <u>40</u> | No. of Stages | Setting Depth _____ FT. | |
| PUMP TEST | | | |
| Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping | | | |

| | | | |
|--|-----------------------------------|--|--|
| WELL DATA | | | |
| Well Depth <u>160</u> | Casing Diameter (In.) <u>4</u> | Casing Length (Ft.) <u>140</u> | |
| Type of Casing <u>SCH40</u> | Hole Depth <u>160</u> | Depth to Static Water Level <u>70</u> | |
| TYPE OF COMPLETION: (Circle One or More): <input checked="" 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 <u>10</u> FEET Type Grout (circle one): <input checked="" type="checkbox"/> Cement, <input type="checkbox"/> Bentonite, or Mix | | | |

| | |
|--|--|
| LOG DATA | |
| TYPE OF LOG RUN (Circle One): <input type="checkbox"/> No Log Run, <input type="checkbox"/> Electric, <input type="checkbox"/> Gamma Ray, <input type="checkbox"/> Density, <input type="checkbox"/> Sonic, <input type="checkbox"/> Neutron, Other (Describe) _____ | |
| Name of Organization Running Log | |

| | | | |
|-------------------------------|----------------------------|---------------------------------|--|
| SCREEN DATA | | | |
| Diameter - Inches <u>4</u> | Length - Feet <u>20</u> | Slot Size - Inches <u>#8</u> | |
| Screen Type <u>SCH40</u> | | Depth to Bottom - Feet | |

| | | | |
|--|--|----------------|--------------|
| GEOLOGIC DATA (Office Use Only) | | | |
| Surface Elev. | Geologic Unit | Unit Thickness | Depth to Top |
| Subs. SWL | Date | Analysis | Aquifer Test |
| Driller's Remarks | | | |
| Top of Lap Pipe or Reduction in Casing | | | |
| FEET | IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE | | |

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM | TO |
|---------------------------------------|-----------|------------|
| <u>Clay</u> | <u>0</u> | <u>30</u> |
| <u>SAUD</u> | <u>30</u> | <u>160</u> |
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| FORMATIONS (Continued) | FROM | TO |
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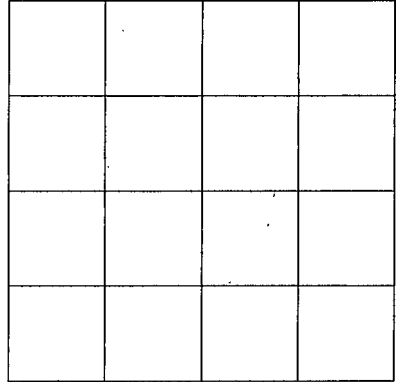
RECEIVED
JUL 27 2000

Dept. of Environmental Quality
Office of Land & Water Resources

IF MORE SPACE IS NEEDED, USE BACK

If well telescopes please
sketch and show depths.

GROUND LEVEL



SECTION _____

Please indicate well location X.

ADDITIONAL INFORMATION

If more than one screen,
show location of each on sketch.