

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 D-21	CODED
DATE WELL COMPLETED 1-11-04	

PERMIT NUMBER
NAME OF DRILLING FIRM Boone's Waterwell

NAME & MAILING ADDRESS OF LANDOWNER Mike Parker 381 Bluff Creek Rd	
Latitude:	Longitude: Wiggins, MS 39577
WELL LOCATION: SEC 7 TOWNSHIP 2 RANGE 10 E NW	
DISTANCE 7 Miles DIRECTION E of NEAREST TOWN Wiggins	
OTHER LANDMARK	
WELL PURPOSE: <input checked="" type="radio"/> Home Irrigation, Municipal, Industrial, Fish Pond, etc.	

WELL DATA		
Well Depth 120	Casing Diameter (In.) 2	Casing Length (Ft.) 110
Type of Casing Pcsch40	Hole Depth 120	Depth to Static Water Level 55
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 10 FEET Type Grout (circle one): <input checked="" type="checkbox"/> Cement, <input type="checkbox"/> Bentonite, or Mix		

SCREEN DATA		
Diameter - Inches 2	Length - Feet 10	Slot Size - Inches #8
Screen Type Pcsch40	Depth to Bottom - Feet	

PUMP DATA		
PUMP TYPE (Circle One): Submersible, Turbine, <input checked="" type="checkbox"/> Jet Flowing Well, Other (Describe)		
POWER TYPE (Circle One): <input checked="" type="checkbox"/> Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) H/P 1		
DESCRIPTION OF FORMATIONS ENCOUNTERED Clay Sand	FROM 0 40	TO 40 120
RECEIVED FEB 17 2004 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.

Signature of Licensed Driller and License No.

D-0656

Date

2-13-04

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

SECTION _____

Please indicate well location X.

Pump Capacity (GPM) 5	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): Electric, Gamma Ray, Density, Sonic, Neutron, Other (Describe) _____	No Log Run
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.