

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY
Bureau of Land and Water Resources

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

COUNTY AND WELL LOCATED <i>Wabene</i>		PERMIT NUMBER <i>0404</i>
WELL NUMBER <i>E</i>	CODED	NAME OF DRILLING FIRM <i>Syman Well Co.</i>
DATE WELL COMPLETED <i>6-30-94</i>		<i>Support ms39503</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Louis White</i>		
<i>73 Albert Cuave Rd</i>		
<i>Perkinston MS 39513</i>		
WELL LOCATION: SEC	TOWNSHIP	RANGE
<i>11</i>	<i>3</i>	<i>N 12 E</i>
DISTANCE	DIRECTION	NEAREST TOWN
_____ Miles	_____ of	_____
OTHER LANDMARK		
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.		

PUMP DATA		
PUMP TYPE (Circle One): Submersible, Turbine, <u>Jet</u> Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): <u>Electric</u> , Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P <u>1</u>		
Pump Capacity (GPM)	No. of Stages	Setting Depth FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

WELL DATA		
Well Depth <i>93'</i>	Casing Diameter (In.) <i>2"</i>	Casing Length (Ft.)
Type of Casing <i>PVC</i>	Hole Depth	Depth to Static Water Level <i>60'</i>
TYPE OF COMPLETION: (Circle One or More): Gravel Packed, Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) _____		
Top of Lap Pipe or Reduction in Casing FEET IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE		

LOG DATA	
TYPE OF LOG RUN (Circle One): Electric, Gamma Ray, Density, Sonic, Neutron, Other (Describe) _____ <u>No Log Run</u>	
Name of Organization Running Log	

SCREEN DATA		
Diameter - Inches <i>2"</i>	Length - Feet <i>20'</i>	Slot Size - Inches
Screen Type <i>PVC</i>	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			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>clay</i> <i>Red</i>	<i>0</i>	<i>20</i>
<i>clay</i> <i>Blue</i>	<i>20</i>	<i>70</i>
<i>sand</i>	<i>70</i>	<i>93</i>

FORMATIONS (Continued)	FROM	TO
RECEIVED		
AUG 12 1994		
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.