

**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>G-89</u>	CODED
DATE WELL COMPLETED <u>4-25-03</u>	

PERMIT NUMBER
NAME OF DRILLING FIRM <u>Boone's Water Well</u>

NAME & MAILING ADDRESS OF LANDOWNER <u>Double C Ranch</u> <u>361 Price Rd</u>		
Latitude:	Longitude: <u>Wiggins, MS 39577</u>	
WELL LOCATION.	SEC <u>8</u>	TOWNSHIP <u>3</u>
		RANGE <u>N 11 E</u>
DISTANCE	DIRECTION	NEAREST TOWN
<u>4</u> Miles	<u>S</u>	of <u>Wiggins</u>
OTHER LANDMARK		
WELL PURPOSE: <input checked="" type="checkbox"/> Home, <input type="checkbox"/> Irrigation, <input type="checkbox"/> Municipal, <input type="checkbox"/> Industrial, <input type="checkbox"/> Fish Pond, etc.		

<b>PUMP DATA</b>		
PUMP TYPE (Circle One): Submersible, Turbine, Jet, Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): <input checked="" type="checkbox"/> Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P <u>1</u>		
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>Clay</u>	<u>0</u>	<u>15</u>
<u>Sand</u>	<u>15</u>	<u>85</u>
<b>RECEIVED</b>		
MAY 27 2003		
BY: OLWR		
Top of Lap Pipe or Reduction in Casing		
FEET	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE	

**WELL DATA**

Well Depth <u>85</u>	Casing Diameter (In.) <u>4</u>	Casing Length (Ft.) <u>65</u>
Type of Casing <u>Sch 40</u>	Hole Depth <u>85</u>	Depth to Static Water Level <u>7</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		

**SCREEN DATA**

Diameter - Inches <u>4</u>	Length - Feet <u>20</u>	Slot Size - Inches <u>#8</u>
Screen Type <u>Sch 40</u>		Depth to Bottom - Feet

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.

Johnny Pearson  
Signature of Licensed Driller and License No.  
0656

5-19-03  
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)	No. of Stages	Setting Depth
20		_____ 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

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