

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY
Bureau of Land and Water Resources

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

COUNTY WELL LOCATED Stone	
WELL NUMBER G	CODED
DATE WELL COMPLETED 5-4-94	

PERMIT NUMBER
NAME OF DRILLING FIRM BOONE'S

NAME & MAILING ADDRESS OF LANDOWNER BILL Rester		
WELL LOCATION: SEC 5 TOWNSHIP 3 RANGE 11 S E		
DISTANCE 3 Miles	DIRECTION 5	NEAREST TOWN Wiggins
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): Submersible, Turbine, Jet, Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P _____		
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 80	Casing Diameter (In.) 2	Casing Length (Ft.) 70
Type of Casing sch 40	Hole Depth 80	Depth to Static Water Level
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		
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) _____	
Name of Organization Running Log	

SCREEN DATA		
Diameter - Inches 2	Length - Feet 10	Slot Size - Inches # 10
Screen Type sch 40	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 Drill set casing only			

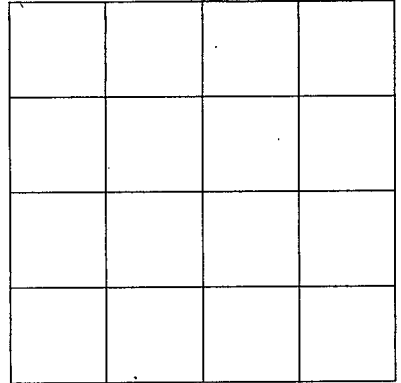
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
Sand	20	80			

IF MORE SPACE IS NEEDED, USE BACK

Dept. of Environmental Quality
Office of Land & Water Resources

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.