

**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-2136</u>	CODED
DATE WELL COMPLETED <u>7-21-99</u>	

PERMIT NUMBER <u>D-514</u>
NAME OF DRILLING FIRM <u>Boneswater well</u>

NAME & MAILING ADDRESS OF LANDOWNER <u>JoAnn Pope</u> <u>King Bee Rd</u> <u>Wiggins, MS 39577</u>			
WELL LOCATION:	SEC <u>2</u>	TOWNSHIP <u>3</u>	RANGE <u>N 11 E</u>
DISTANCE <u>6</u> Miles	DIRECTION <u>SE</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.			

<b>PUMP DATA</b>		
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 _____		
Pump Capacity (GPM) <u>20</u>	No. of Stages	Setting Depth _____ FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

<b>WELL DATA</b>		
Well Depth <u>110</u>	Casing Diameter (In.) <u>4</u>	Casing Length (Ft.) <u>90</u>
Type of Casing <u>Sch 40</u>	Hole Depth <u>110</u>	Depth to Static Water Level <u>35</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) _____		

<b>LOG DATA</b>	
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	

WELL GROUTED TO A DEPTH OF <u>5</u> FEET Type Grout (circle one): <input checked="" type="checkbox"/> Cement, <input type="checkbox"/> Bentonite, or Mix
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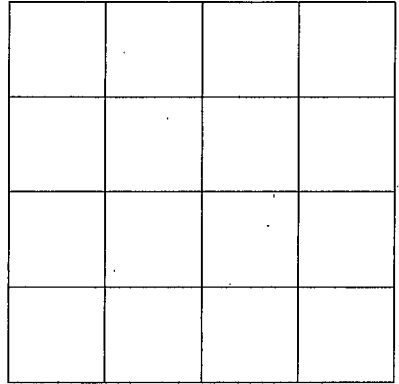
<b>GEOLOGIC DATA (Office Use Only)</b>			
Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test
Driller's Remarks			
Top of Lap Pipe or Reduction in Casing FEET <input type="checkbox"/> IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE			

<b>SCREEN DATA</b>		
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	

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
<u>Clay</u>	<u>0</u>	<u>60</u>	<u>RECEIVED</u> <u>10/25/99</u>		
<u>Sand</u>	<u>60</u>	<u>110</u>			
			<u>JUL 27 2000</u>		
			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

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