

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Office of Land and Water Resources

COUNTY WELL LOCATED
Sunflower

WELL NUMBER CODED PERMIT NUMBER
D-93

DATE WELL COMPLETED
5-14-01

NAME OF DRILLING FIRM
**Irrigation Equipment Inc
Indianola, MS**

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

NAME & MAILING ADDRESS OF LANDOWNER
Six Shooter Land & Timber
971 Lakeland Dr., Suite 1250
Jackson, MS 39205

Latitude:
Longitude:

WELL LOCATION.	SEC	TOWNSHIP	RANGE
sw/sw	20	23N S	3W W
DISTANCE	DIRECTION	NEAREST TOWN	
Miles	North	of Drew	

OTHER LANDMARK

WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.
Irrigation

WELL DATA

Well Depth	Casing Diameter (In.)	Casing Length (Ft.)
117	16	77
Type of Casing	Hole Depth	Depth to Static Water Level
pvc		

TYPE OF COMPLETION: (Circle One or More):
 Gravel Packed, Underreamed, Telescoped,
 Natural Development, Open Hole, Other
 (Describe)

WELL GROUTED TO A DEPTH OF _____ FEET
 Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

Diameter - Inches	Length - Feet	Slot Size - Inches
16	40	.050
Screen Type	Depth to Bottom - Feet	
pvc	117	

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 60

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Clay	0	45
Clay/Fine Sand	45	55
Med. Sand	55	65
Coarse Sand/gravel	65	95
Gravel	95	115
Fine Sand	115	117

REC'D SEP 10 2001

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]
Signature of Licensed Driller and License No.

0-439 9-6-01
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

X			

SECTION 20

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
2500 to 3000	1	60 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

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