

SUNFLOWER

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
Leflore

WELL NUMBER
D 2045

CODED

DATE WELL COMPLETED
5/13/99

PERMIT NUMBER

NAME OF DRILLING FIRM
McClain's Pump Service

NAME & MAILING ADDRESS OF LANDOWNER
Mike Wagner
P.O. Box 456
Sumner MS 38957

WELL LOCATION: SEC. 3 TOWNSHIP B RANGE 3

DISTANCE _____ DIRECTION _____ NEAREST TOWN _____

Miles _____ of _____

OTHER LANDMARK _____

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

PUMP DATA

PUMP TYPE (Circle One):
Submersible, furbine, Jet, Flowing Well,
Other (Describe) _____

POWER TYPE (Circle One):
Electric, Tractor, Diesel, Gasoline, Butane,
Other (Describe) _____ H/P _____

Pump Capacity (GPM) 2800 No. of Stages 1 Setting Depth 70 FT.

PUMP TEST

Well yielded _____ GPM with
a drawdown of _____ ft.
after _____ hours of pumping

WELL DATA

Well Depth 105 Casing Diameter (In.) 16 Casing Length (Ft.) 65

Type of Casing PVC Hole Depth 105 Depth to Static Water Level 34 ft.

LOG DATA

TYPE OF LOG RUN (Circle One):
No Log Run, Electric, Gamma Ray, Density, Sonic, Neutron,
Other (Describe) _____

Name of Organization Running Log _____

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

WELL GROUTED TO A DEPTH OF 10 FEET
Type Grout (circle one): Cement, Bentonite, or Mix

GEOLOGIC DATA (Office Use Only)

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 IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

SCREEN DATA

Diameter - Inches 16 Length - Feet 40 Slot Size - Inches .50

Screen Type PVC Depth to Bottom - Feet 105

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>Top Soil</u>	<u>Top</u>	<u>14</u>
<u>Fine Sand</u>	<u>14</u>	<u>30</u>
<u>Coarse Sand</u>	<u>30</u>	<u>50</u>
<u>Coarse Sand + gravel</u>	<u>50</u>	<u>105</u>

FORMATIONS (Continued)

FROM TO

RECEIVED

MAY 28 1999

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.