

replaces 00805?

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Office of Land and Water Resources

COUNTY WELL LOCATED <b>Sunflower</b>	
WELL NUMBER <b>E-90</b>	CODED
DATE WELL COMPLETED <b>8-9-01</b>	

**33-46-40 90-35-18**

PERMIT NUMBER
NAME OF DRILLING FIRM <b>Irrigation Equipment Inc.</b>
<b>Indianola, MS</b>

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

NAME & MAILING ADDRESS OF LANDOWNER <b>Garner Falls/Tollison Place</b>	
<b>Box 112</b>	
<b>Minter City, MS 38944</b>	
Latitude: Longitude:	
WELL LOCATION <b>sw/nw</b>	SEC <b>14</b> TOWNSHIP <b>22N</b> RANGE <b>4W</b>
DISTANCE _____ MILES _____ of _____ NEAREST TOWN _____	
OTHER LANDMARK <b>Trunkline Gas Line to East</b>	
WELL PURPOSE: <u>Home, Irrigation, Municipal, Industrial, Fish Pond, etc.</u> <b>Irrigation Pivot</b>	

**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 100

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Clay	0	18
Fine Sand	18	25
Fine Sand/gravel	25	35
Med. Sand/gravel	35	72
Fine Sand	72	80
Med. Sand/gravel	80	107

**WELL DATA**

Well Depth <b>107</b>	Casing Diameter (In.) <b>16</b>	Casing Length (Ft.) <b>67</b>
Type of Casing <b>pvc</b>	Hole Depth <b>107</b>	Depth to Static Water Level <b>38ft.</b>
TYPE OF COMPLETION: (Circle One or More): <u>Gravel Packed</u> , Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) _____		
WELL GROUTED TO A DEPTH OF _____ FEET Type Grout (circle one): <u>Cement</u> , Bentonite, or Mix		

**SCREEN DATA**

Diameter - Inches <b>16</b>	Length - Feet <b>40</b>	Slot Size - Inches <b>.050</b>
Screen Type <b>pvc</b>		Depth to Bottom - Feet <b>107</b>

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.

**REC'D SEP 24 2001**

*John P. [Signature]*  
Signature of Licensed Driller and License No. **0-439**

**9-21-01**  
Date

If well telescopes please sketch and show depths.

GROUND LEVEL

X			

SECTION 14

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
	4	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

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