

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 Sunflower	
WELL NUMBER J-97	CODED
DATE WELL COMPLETED 7-24-03	

PERMIT NUMBER MSGD-39324
NAME OF DRILLING FIRM Irrigation Equipment Inc.
Indianola, MS

NAME & MAILING ADDRESS OF LANDOWNER St. Rest Plantation 65 Holly Ridge Road Indianola, MS 38751

Latitude:
Longitude:

WELL LOCATION.	SEC	TOWNSHIP	RANGE
NW/SE	30	20N	S 5W
DISTANCE	DIRECTION	NEAREST TOWN	
	Miles North	Holly Ridge	

OTHER LANDMARK
Gas Line

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

WELL DATA

Well Depth 125	Casing Diameter (In.) 16	Casing Length (Ft.) 95
Type of Casing pvc	Hole Depth 125	Depth to Static Water Level

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

SCREEN DATA

Diameter - Inches 16	Length - Feet 30	Slot Size - Inches .050
Screen Type PVC	Depth to Bottom - Feet	

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 **40**

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Clay	0	28
Fine Sand	29	65
Med. Sand/gravel	66	85
Fine Sand	86	93
Med. Sand/gravel	94	125

Screen 125-96
Screen 85-76

RECEIVED

AUG 11 2003

BY: OLWR

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 of Licensed Driller and License No. _____

Date _____

0439

8-7-03

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

		X	

SECTION 30

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
	2	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.