

**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 <b>Sunflower</b>	
WELL NUMBER <b>K</b>	CODED
DATE WELL COMPLETED <b>2013</b> <b>10-31-94</b>	

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

NAME & MAILING ADDRESS OF LANDOWNER <b>Parker Brothers</b>			
<b>Rt.1, Box S-31</b>			
<b>Sunflower, MS 38778</b>			
WELL LOCATION:	SEC <b>35</b>	TOWNSHIP <b>20N</b>	RANGE <b>4W E</b> <b>S W</b>
DISTANCE <b>2</b> Miles	DIRECTION <b>west</b>	NEAREST TOWN <b>of Sunflower</b>	
OTHER LANDMARK			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. <b>Irrigation</b>			

<b>PUMP DATA</b>			
PUMP TYPE (Circle One): <input checked="" type="radio"/> Submersible, <input type="radio"/> Turbine, <input type="radio"/> Jet <input type="radio"/> Flowing Well, Other (Describe) _____			
POWER TYPE (Circle One): <input checked="" type="radio"/> Electric, <input type="radio"/> Tractor, <input type="radio"/> Diesel, <input type="radio"/> Gasoline, <input type="radio"/> Butane, Other (Describe) _____ H/P <b>15</b>			
Pump Capacity (GPM) <b>750</b>	No. of Stages <b>1</b>	Setting Depth <b>60</b> FT.	
PUMP TEST			
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping			

<b>WELL DATA</b>		
Well Depth <b>114</b>	Casing Diameter (In.) <b>8</b>	Casing Length (Ft.) <b>74</b>
Type of Casing <b>PVC</b>	Hole Depth <b>114</b>	Depth to Static Water Level <b>40</b>
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="radio"/> Gravel Packed, <input type="radio"/> Underreamed, <input type="radio"/> Telescoped, <input type="radio"/> Natural Development, <input type="radio"/> Open Hole, <input type="radio"/> Other (Describe) _____		
WELL GROUTED TO A DEPTH OF _____ FEET Type Grout (circle one): Cement, Bentonite, or Mix		

<b>LOG DATA</b>	
TYPE OF LOG RUN (Circle One): <input type="radio"/> No-Log Run, <input type="radio"/> Electric, <input type="radio"/> Gamma Ray, <input type="radio"/> Density, <input type="radio"/> Sonic, <input type="radio"/> Neutron, Other (Describe) _____	
Name of Organization Running Log	

<b>SCREEN DATA</b>		
Diameter - Inches <b>8</b>	Length - Feet <b>40</b>	Slot Size - Inches <b>.030</b>
Screen Type <b>PVC</b>	Depth to Bottom - Feet <b>114</b>	

<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			
<b>FEET</b>		IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE	

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Clay	0	15
Fine Sand	15	35
Fine Sand & Gravel	35	75
Med. Sand & Gravel	75	114

FORMATIONS (Continued)	FROM	TO
<b>RECEIVED</b>		
<b>MAR 29 1995</b>		
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

	X		

SECTION 35

Please indicate well location X.

ADDITIONAL INFORMATION

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