MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY
Bureau of Land and Water Resources

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

COUNTY WELL LOCATED	
Sunflower	
WELL NUMBER	CODED
Site-4 Well-1	
SU-L702 L 135	
DATE WELL COMPLETED	
6/3/94	

PERMIT NUMBER
NAME OF DRILLING FIRM
Layne-Central

NAME & MAILING ADDRESS OF LANDOWNER

Turner Arant

Route 1, Box B-1

Sunflower, MS 38778

WELL LOCATION — SEC: 18 TOWNSHIP: T20 (N/S) RANGE: R3 (E/W)

DISTANCE: _____ Miles DIRECTION: _____ NEAREST TOWN: of _____

OTHER LANDMARK:

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

PUMP DATA N/A

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

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

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

PUMP TEST

Well yielded _____ GPM with

a drawdown of _____ ft.

after _____ hours of pumping

WELL DATA

Well Depth	Casing Diameter (In.)	Casing Length (Ft.)
182'	6" x 4"	172'
Type of Casing	**Hole Depth**	**Depth to Static Water Level**
PVC	220	68'

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

Top of Lap Pipe or Reduction in Casing

6 FEET

IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

SCREEN DATA

Diameter - Inches	Length - Feet	Slot Size - Inches
4"	10'	.010"
Screen Type	**Depth to Bottom - Feet**	
PVC	195'	

LOG DATA

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

Name of Organization Running Log

State

GEOLOGIC DATA (Office Use Only)

Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test

Driller's Remarks

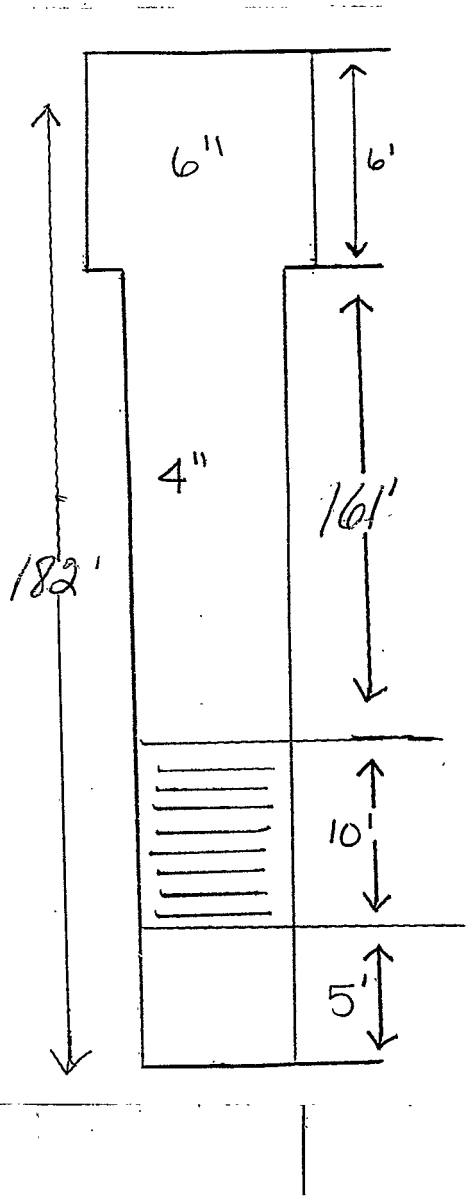
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Hard Clay	0	20
Clay	20	40
Coarse Sand	40	60
Gravel Sand	60	70
Peat Gravel	70	80
Sand	80	100
Coarse Sand	100	115
Gravel	115	120
Clay	120	140
Clay	140	160
Sand Clay Stk.	160	180

FORMATIONS (Continued)	FROM	TO
Light Sand	180	220

RECEIVED
JUL 25 1994
Dept. of Environmental Quality
Office of Land & Water Resources

IF MORE SPACE IS NEEDED: USE BACK

If well telescopes please
sketch and show depths.



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

SECTION _____

Please indicate well location X.

ADDITIONAL INFORMATION