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	1
CODED	
PERMIT NUMBER	
NAME OF DRILLING FIRM	Irrigation Equipment Indianola, MS
DATE WELL COMPLETED	9-29-95

NAME & MAILING ADDRESS OF LANDOWNER	Morgan Brothers P.O. Box 369 Cleveland, MS 38732
WELL LOCATION: SEC	20
TOWNSHIP	20N S
RANGE	3W E W
DISTANCE	2½ Miles
DIRECTION	North
NEAREST TOWN	of Sunflower
OTHER LANDMARK	
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.	Irrigation

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 25

Pump Capacity (GPM)	No. of Stages	Setting Depth
1200	1	80 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.)
135	16	75
Type of Casing	**Hole Depth**	**Depth to Static Water Level**
PVC	135	Est. 45 ft.

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

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

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

SCREEN DATA

Diameter - Inches	Length - Feet	Slot Size - Inches
16	60	.032
Screen Type	**Depth to Bottom - Feet**	
PVC	135	

Top of Lap Pipe or Reduction in Casing _____ FEET IF TELESCOPED OR MORE THAN ONE SCREEN, USE BACK PAGE

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Clay	0	35
Fine Sand	35	45
Fine Sand & Gravel	45	65
Med. Sand & Gravel	65	75
Fine Sand & Gravel	75	85
Med. Sand & Gravel	85	135

FORMATIONS (Continued)	FROM	TO
IF MORE SPACE IS NEEDED, USE BACK		

DEC 11 1995
Dept. of Environmental Quality
Office of Land & Water Resources

If well telescopes please
sketch and show depths.

GROUND LEVEL

		X	

SECTION 20

Please indicate well location X.

ADDITIONAL INFORMATION

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