

**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 <i>Sunflower</i>	
WELL NUMBER <i>T-101</i>	CODED
DATE WELL COMPLETED <i>4-23-02</i>	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Schudco Ltd</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Ralph Pierce Rt 2 Box 254 Isola, MS. 38754</i>			
Latitude: <i>33° 18' 48" N</i> Longitude: <i>090° 35' 16" W</i>			
WELL LOCATION	SEC	TOWNSHIP	RANGE
<i>NW/NW</i>	<i>23</i>	<i>17</i>	<i>4</i>
DISTANCE	DIRECTION	NEAREST TOWN	
<i>3</i> Miles	<i>South</i>	<i>of Inverness</i>	
OTHER LANDMARK			
WELL PURPOSE: Home <u>Irrigation</u> Municipal, Industrial, Fish Pond, etc.			

PUMP DATA			
PUMP TYPE (Circle One): <input checked="" type="radio"/> Submersible, Turbine, Jet, Flowing Well, Other (Describe) _____			
POWER TYPE (Circle One): <input checked="" type="radio"/> Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P <i>30</i>			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>sandy clay</i>	<i>0</i>	<i>10</i>
<i>sand + p. gravel</i>	<i>10</i>	<i>30</i>
<i>med to coarse sand</i>	<i>30</i>	<i>45</i>
<i>coarse sand + p. gravel</i>	<i>45</i>	<i>50</i>
<i>med to coarse sand</i>	<i>50</i>	<i>90</i>
<i>coarse sand + gravel</i>	<i>90</i>	<i>110</i>

**WELL DATA**

Well Depth <i>110</i>	Casing Diameter (In.) <i>10</i>	Casing Length (Ft.) <i>70</i>
Type of Casing <i>pvc</i>	Hole Depth <i>110</i>	Depth to Static Water Level
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="radio"/> 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

**SCREEN DATA**

Diameter - Inches <i>10</i>	Length - Feet <i>40</i>	Slot Size - Inches <i>1035</i>
Screen Type <i>pvc</i>	Depth to Bottom - Feet <i>110</i>	

<b>RECEIVED</b>	
<i>MAY 24 2002</i>	
<b>BY: OLWR</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.

*Charles M. Nichols 0667*  
Signature of Licensed Driller and License No.

*4-26-02*  
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

✱			
X			

SECTION 23

Please indicate well location X.

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