

# 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>TALLAHATCHIE</b>	
WELL NUMBER <b>4</b>	CODED
DATE WELL COMPLETED <b>10-03</b>	

PERMIT NUMBER
NAME OF DRILLING FIRM <b>C&amp;S Drilling</b>

NAME & MAILING ADDRESS OF LANDOWNER:  
**B.C. FARMS  
Belzonia, MS.**

Latitude:  
Longitude: **44**

WELL LOCATION: SEC **14** T-**25** N R-**1** E

DISTANCE **6** Miles DIRECTION **NW** of NEAREST TOWN **Charleston**

OTHER LANDMARK  
  
WELL PURPOSE: Home Irrigation, Municipal, Industrial, Fish Pond, etc.

**WELL DATA**

Well Depth <b>560</b>	Casing Diameter (In.) <b>4</b>	Casing Length (Ft.) <b>540</b>
Type of Casing <b>PVC</b>	Hole Depth <b>563</b>	Depth to Static Water Level <b>Above</b>

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 <b>4</b>	Length - Feet <b>20</b>	Slot Size - Inches <b>.010</b>
Screen Type <b>PVC</b>	Depth to Bottom - Feet <b>560</b>	

PUMP DATA		
PUMP TYPE (Circle One): <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine, <input type="checkbox"/> Jet <input checked="" type="checkbox"/> Flowing Well Other (Describe)		
POWER TYPE (Circle One): <input checked="" type="checkbox"/> Electric, <input type="checkbox"/> Tractor, <input type="checkbox"/> Diesel, <input type="checkbox"/> Gasoline, <input type="checkbox"/> Butane, Other (Describe)    H/P <b>5</b>		
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
TOP SOIL & clay	0	16
Sand	16	51
SAND & Gravel	57	101
SAND	101	148
HARD Shell	148	206
Shell & Rock	207	221
Shell	221	442
Shell & SAND	442	502
SAND	502	562
<b>RECEIVED</b>		
<b>OCT 07 2003</b>		
<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.

**Cabin Drellin 0-554**  
Signature of Licensed Driller and License No.

**10-2-03**  
Date

If well telescopes please sketch and show depths.

GROUND LEVEL

		X	

SECTION 14

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
<u>70</u>	<u>12</u>	<u>105</u> FT.

PUMP TEST

Well yielded 90 GPM with  
a drawdown of 42 ft.  
after 12 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.