

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 TATE	
WELL NUMBER C	CODED
DATE WELL COMPLETED 3-29-93	

PERMIT NUMBER HICKS WELL CO.
NAME OF DRILLING FIRM RT. 1 BOX 157
SENATOBIA, MS 38668

NAME & MAILING ADDRESS OF LANDOWNER GATHA Hart			
RT 3 Box 175			
Coldwater MS			
WELL LOCATION:	SEC	TOWNSHIP	RANGE
SWSE	5	4	6
DISTANCE	DIRECTION	NEAREST TOWN	
10 Miles	NE	of Senatobia	
OTHER LANDMARK			
WELL PURPOSE <input checked="" type="checkbox"/> Home Irrigation, <input type="checkbox"/> Municipal, <input type="checkbox"/> Industrial, <input type="checkbox"/> Fish Pond, etc.			

PUMP DATA		
PUMP TYPE (Circle One): <input checked="" type="checkbox"/> Submersible, <input type="checkbox"/> Turbine, <input type="checkbox"/> Jet <input 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 _____		
Pump Capacity (GPM) 10	No. of Stages 12	Setting Depth 120 FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

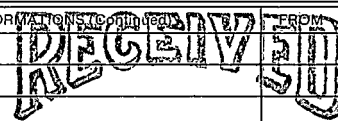
WELL DATA		
Well Depth 160	Casing Diameter (In.) 4"	Casing Length (Ft.) 150
Type of Casing PVC	Hole Depth 160	Depth to Static Water Level 100'
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped, <input type="checkbox"/> Natural Development, <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other (Describe) _____		
Top of Lap Pipe or Reduction in Casing FEET IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE		

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

SCREEN DATA		
Diameter - Inches	Length - Feet	Slot Size - Inches
Screen Type	Depth to Bottom - Feet	

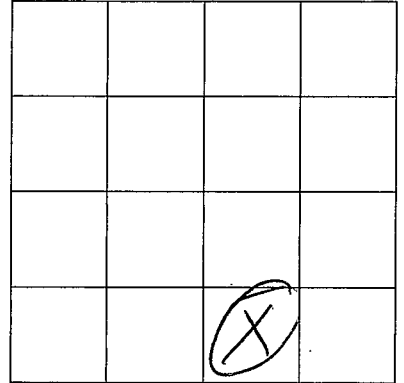
GEOLOGIC DATA (Office Use Only)			
Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test
Driller's Remarks			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Red Sand	0	40
Gravel	40	60
Clay	60	120
White Sand	120	160

 MAY 25 1993	
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



SECTION _____

Please indicate well location X.

ADDITIONAL INFORMATION

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