

**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 <i>STATE</i>	
WELL NUMBER <i>2082</i>	CODED
DATE WELL COMPLETED <i>7-9-93</i>	

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

NAME & MAILING ADDRESS OF LANDOWNER <i>Robert Johnson</i>			
<i>P.O. 232 Senatobia ms</i>			
<i>Senatobia MS 38668</i>			
WELL LOCATION:	SEC	TOWNSHIP	RANGE
	<i>28</i>	<i>5 N</i>	<i>8 E</i>
DISTANCE	DIRECTION	NEAREST TOWN	
<i>2</i> Miles	<i>West</i> of	<i>Senatobia</i>	
OTHER LANDMARK			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. <i>Home</i>			

<b>PUMP DATA</b>		
PUMP TYPE (Circle One): <input checked="" type="radio"/> Submersible, <input type="radio"/> Turbine, <input type="radio"/> Jet <input type="radio"/> Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): <input checked="" type="radio"/> Electric, <input type="radio"/> Tractor, <input type="radio"/> Diesel, <input type="radio"/> Gasoline, <input type="radio"/> Butane, Other (Describe) _____ H/P _____		
Pump Capacity (GPM) <i>10</i>	No. of Stages	Setting Depth <i>100</i> FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

<b>WELL DATA</b>		
Well Depth <i>120'</i>	Casing Diameter (In.) <i>4 in</i>	Casing Length (Ft.) <i>110'</i>
Type of Casing <i>PVC</i>	Hole Depth <i>120'</i>	Depth to Static Water Level <i>80'</i>
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="radio"/> Gravel Packed, <input type="radio"/> Underreamed, <input type="radio"/> Telescoped, <input type="radio"/> Natural Development, <input type="radio"/> Open Hole, <input type="radio"/> Other (Describe) _____		
Top of Lap Pipe or Reduction in Casing		
FEET	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE	

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

<b>SCREEN DATA</b>		
Diameter - Inches <i>4 in</i>	Length - Feet <i>10'</i>	Slot Size - Inches <i>13"</i>
Screen Type <i>PVC</i>	Depth to Bottom - Feet <i>10'</i>	

<b>GEOLOGIC DATA (Office Use Only)</b>			
Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test

Driller's Remarks

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
<i>Red Sand</i>	<i>0</i>	<i>20</i>	<b>RECEIVED</b>  <b>AUG 23 1993</b>		
<i>sand &amp; clay</i>	<i>20</i>	<i>60</i>			
<i>white sand</i>	<i>60</i>	<i>120</i>			

IF MORE SPACE IS NEEDED, USE BACK

Dept. of Environmental Quality  
Office of Land & Water Resources

If well telescopes please sketch and show depths.

GROUND LEVEL

		X	

SECTION \_\_\_\_\_

Please indicate well location X.

ADDITIONAL INFORMATION

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