

# MISSISSIPPI DEPARTMENT OF NATURAL RESOURCES

Bureau of Land and Water Resources

P.O. Box 10631

Jackson, Mississippi 39209

WATER WELL DRILLERS LOG

|                                       |       |
|---------------------------------------|-------|
| COUNTY WELL LOCATED<br><b>TATE</b>    |       |
| WELL NUMBER<br><b>G</b>               | CODED |
| DATE WELL COMPLETED<br><b>7-15-86</b> |       |

|   |
|---|
| PERMIT NUMBER                                 |
| NAME OF DRILLING FIRM<br><b>Hicks Well Co</b> |
| <b>Senatobia, MS</b>                          |

|   |           |                     |
|---|-----------|---------------------|
| NAME & MAILING ADDRESS OF LANDOWNER<br><b>J. W. MAGNESS</b>   |           |                     |
| <b>RT. 3</b>  |           |                     |
| <b>Senatobia, MS</b>  |           |                     |
| WELL LOCATION: SEC  | TOWNSHIP  | RANGE               |
| <b>25</b>   | <b>5</b>  | <b>7</b>            |
|   | <b>S</b>  | <b>E</b>            |
| DISTANCE  | DIRECTION | NEAREST TOWN        |
| <b>4</b> Miles  | <b>E</b>  | of <b>Senatobia</b> |
| OTHER LANDMARK  |           |                     |
| WELL PURPOSE: <input checked="" type="radio"/> Home, <input type="radio"/> Irrigation, <input type="radio"/> Municipal, <input type="radio"/> Industrial, <input type="radio"/> Fish Pond, etc. |           |                     |

|  |               |               |
|--|---------------|---------------|
| PUMP DATA  |               |               |
| PUMP TYPE (Circle One):<br><input checked="" type="radio"/> Submersible <input type="radio"/> Turbine, <input type="radio"/> Jet <input type="radio"/> Flowing Well,<br>Other (Describe) _____                   |               |               |
| POWER TYPE (Circle One):<br><input type="radio"/> Electric, <input type="radio"/> Tractor, <input type="radio"/> Diesel, <input type="radio"/> Gasoline, <input type="radio"/> Butane,<br>Other (Describe) _____ |               |               |
| Pump Capacity (GPM)  | No. of Stages | Setting Depth |
| <b>10</b>  | <b>7</b>      | <b>80</b> FT. |
| PUMP TEST  |               |               |
| Well yielded <b>10</b> GPM with<br>a drawdown of _____ ft.<br>after _____ hours of pumping   |               |               |

|  |                                    |  |
|--|------------------------------------|--|
| WELL DATA  |                                    |  |
| Well Depth<br><b>140</b>   | Casing Diameter (In.)<br><b>4"</b> | Casing Length (Ft.)<br><b>130</b>        |
| Type of Casing<br><b>PVC</b>   | Hole Depth<br><b>140</b>           | Depth to Static Water Level<br><b>60</b> |
| TYPE OF COMPLETION: (Circle One or More):<br><input checked="" type="radio"/> Gravel Packed, <input type="radio"/> Underreamed, <input type="radio"/> Telescoped,<br><input type="radio"/> Natural Development, <input type="radio"/> Open Hole, <input type="radio"/> Other |                                    |  |
| Top of Lap Pipe or Reduction in Casing   |                                    |  |
| FEET <input type="checkbox"/> IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE   |                                    |  |

|  |  |
|--|--|
| LOG DATA   |  |
| TYPE OF LOG RUN (Circle One):<br><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,<br>Other (Describe) _____ |  |
| Name of Organization Running Log   |  |

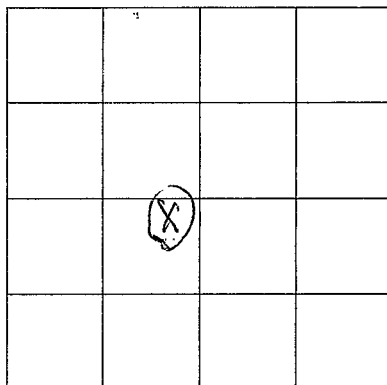
|                                |                             |                                 |
|--------------------------------|-----------------------------|---------------------------------|
| SCREEN DATA                    |                             |                                 |
| Diameter - Inches<br><b>4"</b> | Length - Feet<br><b>10'</b> | Slot Size - Inches<br><b>60</b> |
| 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         | FORMATIONS (Continued)  | FROM | TO |
|---------------------------------------|-----------|------------|---|------|----|
| <b>P. C.</b>                          | <b>0</b>  | <b>20</b>  | <b>RECEIVED</b>   |      |    |
| <b>W-S.</b>                           | <b>20</b> | <b>140</b> |   |      |    |
|                                       |           |            | <b>SEP 05 1986</b>  |      |    |
|                                       |           |            | Department of Natural Resources<br>Bureau 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.