

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>Tate</i>	
WELL NUMBER <i>2109</i>	CODE#
DATE WELL COMPLETED <i>2-8-93</i>	

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

NAME & MAILING ADDRESS OF LANDOWNER <i>Estelle Harrison</i>		
<i>8445 Chesterfield Dr</i>		
<i>Southaven, MS 38617</i>		
WELL LOCATION:	SEC	TOWNSHIP RANGE
	<i>15</i>	<i>5 N 7 E</i>
DISTANCE	DIRECTION	NEAREST TOWN
<i>6</i> Miles	<i>NE</i>	<i>Senatobia</i>
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="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 <i>1/2</i>		
Pump Capacity (GPM)	No. of Stages	Setting Depth
<i>10</i>	<i>9</i>	<i>130</i> FT.
PUMP TEST		
Well yielded _____ <i>10</i> _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

WELL DATA		
Well Depth <i>155</i>	Casing Diameter (In.) <i>4"</i>	Casing Length (Ft.) <i>145</i>
Type of Casing <i>PVC</i>	Hole Depth <i>155</i>	Depth to Static Water Level <i>110</i>
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="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	

SCREEN DATA		
Diameter - Inches <i>4"</i>	Length - Feet <i>10'</i>	Slot Size - Inches <i>013</i>
Screen Type <i>PVC</i>	Depth to Bottom - Feet <i>101</i>	

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
<i>R. SAND</i>	<i>0</i>	<i>40</i>	RECEIVED		
<i>CLAY</i>	<i>40</i>	<i>80</i>			
<i>W. SAND</i>	<i>80</i>	<i>155</i>			
			MAR 22 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

			X

SECTION _____

Please indicate well location X.

ADDITIONAL INFORMATION

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