

**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 <u>TATE</u>		PERMIT NUMBER
WELL NUMBER <u>463</u>	CODED	
DATE WELL COMPLETED <u>9-25-03</u>		NAME OF DRILLING FIRM <u>SMITH WELL DRILLING + SEW.</u>

NAME & MAILING ADDRESS OF LANDOWNER <u>SARA BURNSIDE</u> <u>LARRY R. CROWTHER</u>			
Latitude:			
Longitude:			
WELL LOCATION	SEC	TOWNSHIP	RANGE
	<u>F-6</u>	<u>T-5</u>	<u>R-6</u>
DISTANCE	DIRECTION	NEAREST TOWN	
<u>1</u> Miles	<u>S/W</u>	of <u>POAGVILLE</u>	
OTHER LANDMARK			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. <u>HOME</u>			

PUMP DATA		
PUMP TYPE (Circle One): <input checked="" type="radio"/> Submersible    Turbine    Jet    Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): <input checked="" type="radio"/> Electric    Tractor    Diesel    Gasoline    Butane, Other (Describe) _____ H/P <u>3/4</u>		
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>TOP SOIL</u>	<u>0</u>	<u>10</u>
<u>YELLOW + RED CLAY</u>	<u>10</u>	<u>40</u>
<u>GRAVEL + RED SAND</u>	<u>40</u>	<u>70</u>
<u>WHITE CLAY</u>	<u>70</u>	<u>140</u>
<u>WHITE SAND</u>	<u>140</u>	<u>166</u>
<b>RECEIVED</b>		
<b>OCT 17 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	

WELL DATA		
Well Depth <u>166'</u>	Casing Diameter (In.) <u>4"</u>	Casing Length (Ft.) <u>156</u>
Type of Casing <u>PVC</u>	Hole Depth <u>166</u>	Depth to Static Water Level <u>80'</u>
TYPE OF COMPLETION: (Circle One or More): Gravel Packed, Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) <u>WASHED SAND</u>		
WELL GROUTED TO A DEPTH OF <u>10</u> FEET Type Grout (circle one): <input checked="" type="radio"/> Cement <input type="radio"/> Bentonite, or Mix		

SCREEN DATA		
Diameter - Inches <u>4"</u>	Length - Feet <u>10</u>	Slot Size - Inches <u>14 TUBS</u>
Screen Type <u>PVC</u>	Depth to Bottom - Feet <u>166</u>	

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.

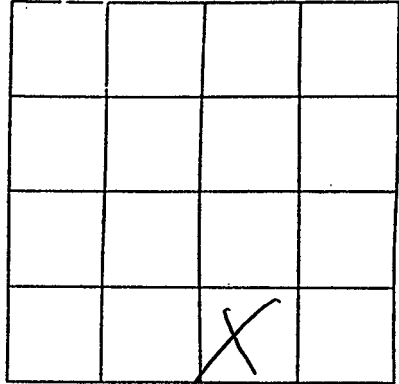
J. M. [Signature] 0-645  
Signature of Licensed Driller and License No.

10-14-03  
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL



SECTION I-6

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
<u>12</u>	<u>12</u>	<u>100</u> FT.
PUMP TEST		
Well yielded <u>14</u> GPM with		
a drawdown of <u>8</u> ft.		
after <u>1</u> 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.