

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>H</i>	CODED
DATE WELL COMPLETED <i>11-26-93</i>	

PERMIT NUMBER HICKS WELL CO.
NAME OF DRILLING FIRM AT. BOX 157
SENATOBIA, MS 38665

NAME & MAILING ADDRESS OF LANDOWNER <i>Builders Const Co</i>		
<i>271 East South St</i>		
<i>Hernando MS 38632</i>		
WELL LOCATION:	SEC	TOWNSHIP RANGE
	<i>29</i>	<i>5 N 6 E</i>
DISTANCE	DIRECTION	NEAREST TOWN
<i>8</i> Miles	<i>EAST</i>	of <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="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 <i>1/2</i>		
Pump Capacity (GPM) <i>10</i>	No. of Stages	Setting Depth <i>120</i> FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

WELL DATA		
Well Depth <i>140'</i>	Casing Diameter (In.) <i>4"</i>	Casing Length (Ft.) <i>130'</i>
Type of Casing <i>PVC</i>	Hole Depth <i>140'</i>	Depth to Static Water Level <i>80</i>
TYPE OF COMPLETION: (Circle One or More): <input 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 <i>4"</i>	Length - Feet <i>10'</i>	Slot Size - Inches <i>13"</i>
Screen Type <i>PVC</i>	Depth to Bottom - Feet <i>140'</i>	

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

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Red Sand</i>	<i>0</i>	<i>20</i>
<i>SAND & CLAY</i>	<i>20</i>	<i>80</i>
<i>White Sand</i>	<i>80</i>	<i>140</i>

Driller's Remarks

FORMATIONS (Continued)	FROM	TO

RECEIVED

JAN 10 1994

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.