

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
TATE

WELL NUMBER	CODED
<u>L-27</u>	
DATE WELL COMPLETED	
<u>1-20-04</u>	

PERMIT NUMBER
NAME OF DRILLING FIRM
<u>NMS WELL DRILLING</u>
<u>FRANK LANGFORD</u>

NAME & MAILING ADDRESS OF LANDOWNER

MIMI SMITH (FRANK'S WELL)
NO 9H RD. YET
TATE + RANCHA CO LAKE MS

Latitude:
Longitude:

WELL LOCATION	SEC	TOWNSHIP	RANGE
	<u>10</u>	<u>6</u>	<u>8</u> <u>S</u> <u>W</u>
DISTANCE	DIRECTION	NEAREST TOWN	
<u>6</u> Miles	<u>W</u>	<u>COMO</u>	

OTHER LANDMARK

WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.
Home

PUMP DATA

PUMP TYPE (Circle One):
 Submersible Turbine Jet Flowing Well,
Other (Describe) _____

POWER TYPE (Circle One):
 Electric Tractor Diesel Gasoline Butane.
Other (Describe) _____ H/P 34

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>DIRT</u>	<u>0</u>	<u>13</u>
<u>SAND</u>	<u>13</u>	<u>40</u>
<u>WTCHAY</u>	<u>40</u>	<u>60</u>
<u>SAND</u>	<u>60</u>	<u>110</u>
<u>MIX SAND/WTCHAY</u>	<u>110</u>	<u>150</u>
<u>W/SAND</u>	<u>150</u>	<u>210</u>

RECEIVED
FEB 13 2004
BY: OLWR

Top of Lap Pipe or Reduction in Casing

FEET	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE
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WELL DATA

Well Depth	Casing Diameter (In.)	Casing Length (Ft.)
<u>210</u>	<u>4</u>	<u>20</u>
Type of Casing	Hole Depth	Depth to Static Water Level
<u>PVC</u>	<u>210</u>	<u>100</u>
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped, <input checked="" type="checkbox"/> Natural Development <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other (Describe) _____		

WELL GROUTED TO A DEPTH OF 12 FEET
Type Grout (circle one): Cement Bentonite or Mix

SCREEN DATA

Diameter - Inches	Length - Feet	Slot Size - Inches
<u>4</u>	<u>10</u>	<u>10/3</u>
Screen Type	Depth to Bottom - Feet	
<u>5007 PVC</u>	<u>210</u>	

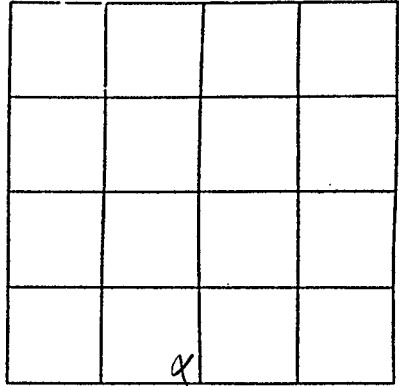
I certify that the well was drilled, constructed and completed in accordance with all applicable Requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

Frank Langford 0622 2-8-04
Signature of Licensed Driller and License No. Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL



SECTION 18

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
<u>12</u>	<u>12</u>	<u>160</u> FT.
PUMP TEST		
Well yielded <u>15</u> ✓ GPM with		
a drawdown of <u>4</u> ft.		
after <u>4</u> hours of pumping		

LOG DATA

TYPE OF LOG RUN (Circle One):		<u>No Log Run</u>
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.