

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 N-2082	CODED
DATE WELL COMPLETED 3-14-00	

PERMIT NUMBER
NAME OF DRILLING PARTY HICKS WELL CO.
ADDRESS SENATOBIA, MS 38668

NAME & MAILING ADDRESS OF LANDOWNER Emma McClinton			
510 O.B. McClintan Rd.			
Senatobia, MS 38668			
WELL LOCATION:	SEC	TOWNSHIP	RANGE
	18	6 N	6 E
DISTANCE	DIRECTION	NEAREST TOWN	
1 1/2 Miles	E	of Springfield	
OTHER LANDMARK			
WELL PURPOSE: <input checked="" type="checkbox"/> Home, <input type="checkbox"/> 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 1/2		
Pump Capacity (GPM)	No. of Stages	Setting Depth
12	1	95 FT.
PUMP TEST		
Well yielded no GPM with a drawdown of Test ft. after _____ hours of pumping		

WELL DATA		
Well Depth 97	Casing Diameter (In.) 4	Casing Length (Fl.) 77
Type of Casing PVC	Hole Depth 97	Depth to Static Water Level 60

TYPE OF COMPLETION: (Circle One or More):
 Gravel Packed, Underreamed, Telescoped,
 Natural Development, Open Hole, Other
 (Describe) _____

WELL GROUTED TO A DEPTH OF **3** FEET
 Type Grout (circle one): Cement Bentonite, or Mix

SCREEN DATA		
Diameter - Inches 4	Length - Feet 20	Slot Size - Inches .013
Screen Type PVC slotted	Depth to Bottom - Feet 77	

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Brown & White Clay	0	15
Red Sand	15	50
White Sand	50	97

LOG DATA	
TYPE OF LOG RUN (Circle One): <input type="radio"/> Electric, Gamma Ray, Density, Sonic, Neutron, <input checked="" type="radio"/> No Log Run, 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

RECEIVED

Top of Lap Pipe or Reduction in Casing

FEET IF TELESCOPED OR MORE THAN ONE SCREEN USE BACK PAGE

FORMATIONS (Continued)	FROM	TO

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 18

Please indicate well location X.

ADDITIONAL INFORMATION

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