

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
TIPPAN

WELL NUMBER **4** CODED

DATE WELL COMPLETED
8-9-2002

PERMIT NUMBER
MSGW 15720

NAME OF DRILLING FIRM
PARK + PARKS WELL SERVICE

Houston MS 38851

NAME & MAILING ADDRESS OF LANDOWNER
TOWN OF FALKNER
P.O. BOX 117
Falkner, MS 38629

Latitude:
Longitude:

WELL LOCATION: SEC **11** TOWNSHIP **32** RANGE **3**

DISTANCE _____ MILES DIRECTION _____ of _____ NEAREST TOWN _____

OTHER LANDMARK _____

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

PUMP DATA

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

POWER TYPE (Circle One):
Electric Tractor, Diesel, Gasoline, Butane,
Other (Describe) _____ **HIP 50**

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
SAND	0	30
CLAY	30	95
SAND	95	115
CLAY	115	150
SAND	150	335
CLAY	335	385
SAND	385	420
CLAY	420	870
SAND	870	895
CLAY	895	925
SAND	925	1030

WELL DATA

Well Depth **1025** Casing Diameter (In.) **12 3/4** Casing Length (Ft.) **925**

Type of Casing **STEEL** Hole Depth **1030** Depth to Static Water Level **225**

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

WELL GROUTED TO A DEPTH OF **925** FEET
Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

Diameter - Inches **8"** Length - Feet **100** Slot Size - Inches **.016**

Screen Type **S S** Depth to Bottom - Feet **1025**

RECEIVED

OCT 17 2002

BY: OLWR

Top of Lap Pipe or Reduction in Casing
865 FEET IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

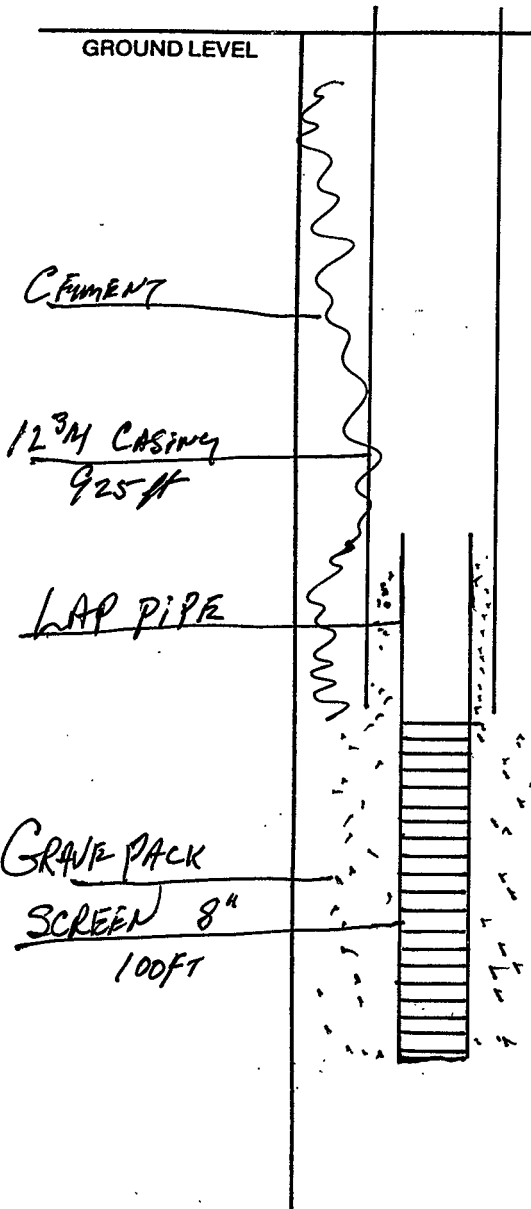
I certify that the well was drilled, constructed and completed in accordance with all applicable Requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

Ralph Parks **0414**
Signature of Licensed Driller and License No.

10-8-2002
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.



			X

SECTION _____

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
250	11	430 FT.
PUMP TEST		
Well yielded <u>250</u> GPM with		
a drawdown of <u>164</u> ft.		
after <u>8</u> hours of pumping		

LOG DATA

TYPE OF LOG RUN (Circle One):	No Log Run, Electric, <u>Gamma Ray</u> , Density, Sonic, Neutron, Other (Describe) <u>MSGS</u>
Name of Organization Running Log	<u>MSGS</u>

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.