

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 <i>Tishomingo</i>	
WELL NUMBER <i>7</i>	CODED
<i>L-108</i>	
DATE WELL COMPLETED <i>2-13-04</i>	

PERMIT NUMBER <i>GW-15887</i>
NAME OF DRILLING FIRM <i>PARKS & PARKS WELL SERVICE</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>TOWN OF BELMONT</i>	
<i>BELMONT MS</i>	
Latitude:	Longitude: <i>10E</i>
WELL LOCATION: <i>SW 1/4</i>	SEC <i>34</i> TOWNSHIP <i>6 N</i> RANGE <i>11 E</i>
DISTANCE _____ Miles	DIRECTION _____ of NEAREST TOWN <i>BELMONT</i>
OTHER LANDMARK	
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. <i>(Circled)</i>	

PUMP DATA	
PUMP TYPE (Circle One): Submersible, <u>Turbine</u> , Jet, Flowing Well, Other (Describe) _____	
POWER TYPE (Circle One): <u>Electric</u> , Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P _____	

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
TOP SOIL	0	4
SAND ROCK	4	7
CLAY	7	18
SAND + GRAVEL	18	24
GRAVEL	24	25
ROCK	25	27
CLAY	27	38
GRAVEL	38	50
CLAY	50	70
SAND + CLAY	70	95
ROCK	95	96
SAND + CLAY	96	100
SAND + GRAVEL	100	110
SAND + CLAY	110	138
WHITE ROCK	138	165
CLAY	165	170

WELL DATA		
Well Depth <i>165</i>	Casing Diameter (In.) <i>14</i>	Casing Length (Ft.) <i>135</i>
Type of Casing <i>STEEL</i>	Hole Depth <i>170</i>	Depth to Static Water Level <i>41.60</i>
TYPE OF COMPLETION: (Circle One or More): <u>Gravel Packed</u> , Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) _____		

WELL GROUTED TO A DEPTH OF <i>120</i> FEET Type Grout (circle one) <u>Cement</u> , Bentonite, or Mix

SCREEN DATA		
Diameter - Inches <i>8</i>	Length - Feet <i>30</i>	Slot Size - Inches
Screen Type <i>STAINLESS STEEL</i>	Depth to Bottom - Feet <i>170</i>	

RECEIVED

FEB 10 2004

DV. OLWD

Top of Lap Pipe or Reduction in Casing
N/A FEET

IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

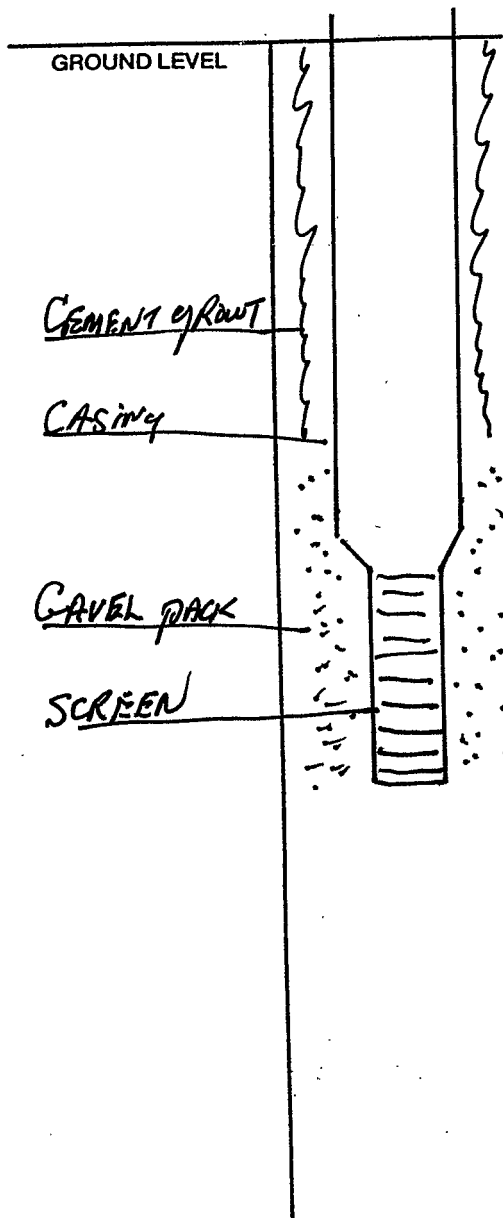
I certify that the well was drilled, constructed and completed in accordance with all applicable Requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

Ryan Park
Signature of Licensed Driller and License No.

2/18/04
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.



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

SECTION _____

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth	
700	3	100	FT.
PUMP TEST			
Well yielded <u>703</u> GPM with			
a drawdown of <u>6.95</u> ft.			
after <u>7</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
