

**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 <b>WAITHAN</b>	
WELL NUMBER <b>52040</b>	CODED
<b>Nov. 1-93</b>	
DATE WELL COMPLETED	

PERMIT NUMBER <b>0-508</b>
NAME OF DRILLING FIRM <b>Jordan Well Ser.</b>

NAME & MAILING ADDRESS OF LANDOWNER <b>Lee Chapel Church</b> <b>Tyler town, Miss.</b>			
WELL LOCATION: SEC	TOWNSHIP	RANGE	
<b>1</b>	<b>1</b>	<b>N</b>	<b>11</b>
	<b>S</b>	<b>E</b>	<b>W</b>
DISTANCE	DIRECTION	NEAREST TOWN	
<b>6</b> Miles	<b>SE</b>	of <b>Tyler town</b>	
OTHER LANDMARK			
WELL PURPOSE: <input checked="" type="checkbox"/> Home Irrigation, <input type="checkbox"/> Municipal, <input type="checkbox"/> Industrial, <input type="checkbox"/> Fish Pond, etc.			

<b>PUMP DATA</b>		
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 <b>1/2</b>		
Pump Capacity (GPM) <b>10</b>	No. of Stages <b>8</b>	Setting Depth <b>80</b> FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

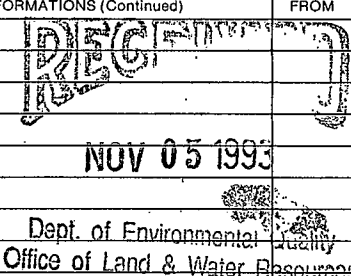
<b>WELL DATA</b>		
Well Depth <b>90</b>	Casing Diameter (In.) <b>4</b>	Casing Length (Ft.) <b>80</b>
Type of Casing <b>PVC</b>	Hole Depth <b>90</b>	Depth to Static Water Level <b>40</b>
TYPE OF COMPLETION: (Circle One or More): Gravel Packed, Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) <b>10ft. cement Grout</b>		
Top of Lap Pipe or Reduction in Casing		
FEET		
IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE		

<b>LOG DATA</b>	
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	

<b>SCREEN DATA</b>		
Diameter - Inches <b>4</b>	Length - Feet <b>10</b>	Slot Size - Inches <b>.012</b>
Screen Type <b>PVC</b>	Depth to Bottom - Feet <b>80</b>	

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

Driller's Remarks

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
<b>TOP Soil</b>	<b>0</b>	<b>1</b>			
<b>SANDY CLAY</b>	<b>1</b>	<b>40</b>			
<b>SAND</b>	<b>40</b>	<b>90</b>			

IF MORE SPACE IS NEEDED, USE BACK

If well telescopes please  
sketch and show depths.

GROUND LEVEL

X			

SECTION 1

Please indicate well location X.

ADDITIONAL INFORMATION

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