

**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 <b>WAITHALL</b>	
WELL NUMBER <b>K-71</b>	CODED
DATE WELL COMPLETED <b>7/19/04</b>	

PERMIT NUMBER
NAME OF DRILLING FIRM <b>Jordan Well Ser</b>

NAME & MAILING ADDRESS OF LANDOWNER <b>Danny Lea Hopgood Rd Tylertown, Ms</b>			
Latitude:			
Longitude:			
WELL LOCATION	SEC <b>3</b>	TOWNSHIP <b>10<sup>N</sup></b>	RANGE <b>12<sup>EW</sup></b>
DISTANCE <b>8</b>	DIRECTION <b>S/E</b>		NEAREST TOWN <b>of Tylertown</b>
OTHER LANDMARK			
WELL PURPOSE: <input checked="" type="radio"/> Home Irrigation, <input type="radio"/> Municipal, <input type="radio"/> Industrial, <input type="radio"/> Fish Pond, etc.			

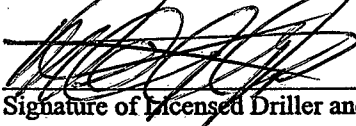
PUMP DATA		
PUMP TYPE (Circle One): <input checked="" type="radio"/> Submersible Other (Describe) _____	Turbine, Jet, Flowing Well,	
POWER TYPE (Circle One): <input checked="" type="radio"/> Electric Other (Describe) _____	Tractor, Diesel, Gasoline, <sup>1</sup> / <sub>2</sub> Butane, H/P	<b>12hp</b>
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<b>top soil</b>	<b>0</b>	<b>1</b>
<b>Sandy Clay</b>	<b>1</b>	<b>75</b>
<b>Sand</b>	<b>75</b>	<b>130</b>
<b>RECEIVED</b>		
<b>AUG 04 2004</b>		
<b>BY: OLWR</b>		
Top of Lap Pipe or Reduction in Casing		
FEET	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE	

WELL DATA		
Well Depth <b>130</b>	Casing Diameter (In.) <b>4</b>	Casing Length (Ft.) <b>120</b>
Type of Casing <b>PVC</b>	Hole Depth <b>130</b>	Depth to Static Water Level <b>80</b>
TYPE OF COMPLETION: (Circle One or More): Gravel Packed, Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) _____		

WELL GROUTED TO A DEPTH OF <b>10 FEET</b>
Type Grout (circle one): Cement, Bentonite, <input checked="" type="radio"/> Mix

SCREEN DATA		
Diameter - Inches <b>4</b>	Length - Feet <b>10</b>	Slot Size - Inches <b>.010</b>
Screen Type <b>PVC</b>	Depth to Bottom - Feet <b>120</b>	

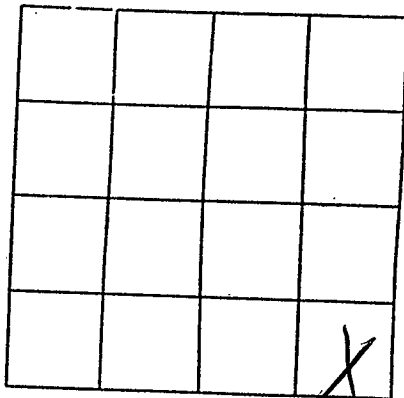
I certify that the well was drilled, constructed and completed in accordance with all applicable Requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

 **0-508**  
Signature of Licensed Driller and License No.

**7/19/04**  
Date

If well telescopes please sketch and show depths.

GROUND LEVEL



SECTION 3

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
<u>10</u>	<u>8</u>	<u>120</u> FT.

PUMP TEST

Well yielded \_\_\_\_\_ GPM with a drawdown of \_\_\_\_\_ ft. after \_\_\_\_\_ 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

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