

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 <u>Whitman</u>	
WELL NUMBER <u>N-2019</u>	CODED
DATE WELL COMPLETED <u>10-18-01</u>	

PERMIT NUMBER <u>0514</u>
NAME OF DRILLING FIRM <u>J+S</u>

NAME & MAILING ADDRESS OF LANDOWNER <u>Jimmy Johnson</u> <u>4020 Nailor Rd</u> <u>Vicksburg MS 39180</u>		
WELL LOCATION	SEC	TOWNSHIP RANGE
	<u>28</u>	<u>15</u> <u>N</u> <u>4</u> <u>E</u> <u>S</u> <u>W</u>
DISTANCE	DIRECTION	NEAREST TOWN
<u>4</u> Miles	<u>SE</u>	of <u>Vicksburg</u>
OTHER LANDMARK		
WELL PURPOSE <input checked="" type="checkbox"/> Home Irrigation. <input type="checkbox"/> Municipal. <input type="checkbox"/> Industrial. <input type="checkbox"/> Fish Pond. etc.		

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

WELL DATA		
Well Depth <u>140</u>	Casing Diameter (in) <u>4</u>	Casing Length (ft) <u>120</u>
Type of Casing <u>Sch 40</u>	Mole Depth	Depth to Static Water Level
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="checkbox"/> Gravel Packed. <input type="checkbox"/> Underreamed. <input type="checkbox"/> Telescoped. <input type="checkbox"/> Natural Development. <input type="checkbox"/> Open Hole. <input type="checkbox"/> Other		
WELL GROUTED TO A DEPTH OF <u>6</u> FEET Type Grout (circle one): <input checked="" type="checkbox"/> Cement. <input type="checkbox"/> Bentonite. or Mix		

LOG DATA	
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	

SCREEN DATA		
Diameter - inches <u>4</u>	Length - Feet <u>20</u>	Slot Size - inches <u># 8</u>
Screen Type <u>Sch 40</u>	Depth to Bottom - Feet	

GEOLOGIC DATA (Office Use Only)			
Surface Elev	Geologic Unit	Unit Thickness	Depth to Top
Subs SWL	Date	Analysis	Aquifer Test
Driller's Remarks			
Top of Lap Pipe or Reduction in Casing			
FEET			
IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	
			FROM	TO
<u>CLAY</u>	<u>0</u>	<u>110</u>		
<u>SAND</u>	<u>110</u>	<u>140</u>		

RECD AUG 14 2001

IF MORE SPACE IS NEEDED, USE BACK

