

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>WASHINGTON</u>	
WELL NUMBER <u>W-127</u>	CODED
DATE WELL COMPLETED <u>10/29/03</u>	

PERMIT NUMBER <u>BW-40171</u>
NAME OF DRILLING FIRM <u>Sidney Cook Drilling</u>

NAME & MAILING ADDRESS OF LANDOWNER <u>Emery Skelton</u>			
<u>P.O. Box 217</u>			
<u>WINTERVILLE MS 38782</u>			
Latitude: <u>33° 32'</u>		Longitude: <u>91° 03'</u>	
WELL LOCATION	SEC <u>5</u>	TOWNSHIP <u>18 S</u>	RANGE <u>6 E</u>
DISTANCE <u>2</u> Miles	DIRECTION <u>EAST</u>	NEAREST TOWN <u>of WINTERVILLE</u>	
OTHER LANDMARK			
WELL PURPOSE: Home, <u>irrigation</u> , 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) _____ H/P 50

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>CLAY</u>	<u>0</u>	<u>30</u>
<u>FINE SAND</u>	<u>30</u>	<u>70</u>
<u>COARSE SAND</u>	<u>70</u>	<u>75</u>
<u>SAND & GRAVEL</u>	<u>75</u>	<u>100</u>

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BY: OLWR

WELL DATA

Well Depth <u>100'</u>	Casing Diameter (In.) <u>16"</u>	Casing Length (Ft.) <u>60'</u>
Type of Casing <u>PVC</u>	Hole Depth <u>100'</u>	Depth to Static Water Level <u>35'</u>

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

WELL GROUTED TO A DEPTH OF 5 FEET
 Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

Diameter - Inches <u>16"</u>	Length - Feet <u>40'</u>	Slot Size - Inches <u>.030</u>
Screen Type <u>PVC</u>	Depth to Bottom - Feet <u>100'</u>	

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

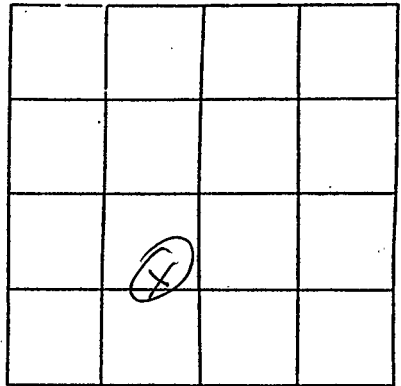
I certify that the well was drilled, constructed and completed in accordance with all applicable Requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

Sidney Cook #0-289
Signature of Licensed Driller and License No.

10/30/03
Date

If well telescopes please sketch and show depths.

GROUND LEVEL



SECTION 5

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth	FT.
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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.