

Wiley Williams

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
Washington

WELL NUMBER
9-83

CODED

DATE WELL COMPLETED
4-19-02

PERMIT NUMBER
GW 38989

NAME OF DRILLING FIRM
Chicot Irrigation

NAME & MAILING ADDRESS OF LANDOWNER
DEERFIELD FARMS
1245 Hwy 12
HOLLANDALE MS 38748

Latitude: 33 10 03 02

Longitude: 090 57 32 19

WELL LOCATION: SEC 6 TOWNSHIP 15 RANGE 7 N W

DISTANCE 0.5 Miles DIRECTION East of NEAREST TOWN Leroy Perry Park

OTHER LANDMARK
North Side of Slough

WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.

PUMP DATA

PUMP TYPE (Circle One):
Submersible, Turbine, Jet, Flowing Well,
Other (Describe)

POWER TYPE (Circle One):
Electric, Tractor, Gasel, Gasoline, Butane,
Other (Describe) H/P 60

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>TOP Soil</u>	<u>0</u>	<u>10</u>
<u>Gray Clay</u>	<u>10</u>	<u>40</u>
<u>Fine Sand</u>	<u>40</u>	<u>70</u>
<u>Coarse Sand</u>	<u>70</u>	<u>120</u>
<u>Pea gravel</u>	<u>120</u>	<u>123</u>

DISCOVERED
12/5

JUN 10 2002

Dept. of Environmental Quality
Office of Land & Water Resources

Top of Lap Pipe or Reduction in Casing

FEET IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

WELL DATA

Well Depth <u>120</u>	Casing Diameter (In.) <u>16</u>	Casing Length (Ft.) <u>70</u>
Type of Casing <u>PVC</u>	Hole Depth <u>123</u>	Depth to Static Water Level

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

WELL GROUTED TO A DEPTH OF _____ FEET

Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

Diameter - Inches <u>16</u>	Length - Feet <u>50</u>	Slot Size - Inches <u>051</u>
Screen Type <u>PVC</u>	Depth to Bottom - Feet <u>120</u>	

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.

James D. McDonald
Signature of Licensed Driller and License No.

6/4/02
Date

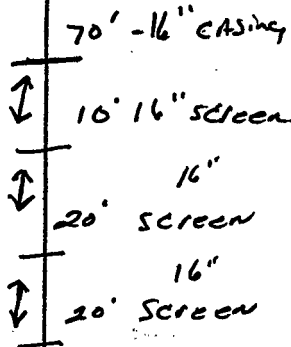
#0332

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

0



		X	

SECTION 6

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
		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

Good formation

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