

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 CODED
R-102

DATE WELL COMPLETED
5-10-03

PERMIT NUMBER

NAME OF DRILLING FIRM
Schudco Ltd

NAME & MAILING ADDRESS OF LANDOWNER
FOWLES FARMS PARTNERS
P.O. Box 1955
OXFORD MS 38655

Latitude: *33° 01' 46N*
Longitude: *091° 06' 35W*

WELL LOCATION. SEC TOWNSHIP RANGE
12/1R 10⁹ 14^N 9^W

DISTANCE DIRECTION NEAREST TOWN
6 Miles West of Glenn Allen

OTHER LANDMARK

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

WELL DATA

Well Depth <i>110</i>	Casing Diameter (In.) <i>16</i>	Casing Length (Ft.) <i>80</i>
Type of Casing <i>pvc</i>	Hole Depth <i>110</i>	Depth to Static Water Level <i>9 ft.</i>

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

WELL GROUTED TO A DEPTH OF *10* FEET
Type Grout (circle one): Cement, Bentonite or Mix

SCREEN DATA

Diameter - Inches <i>16</i>	Length - Feet <i>30</i>	Slot Size - Inches <i>.035</i>
Screen Type <i>110</i>	Depth to Bottom - Feet <i>110</i>	

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

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Sandy clay</i>	<i>0</i>	<i>20</i>
<i>fine sand</i>	<i>20</i>	<i>30</i>
<i>med to coarse sand</i>	<i>30</i>	<i>50</i>
<i>fine sand</i>	<i>50</i>	<i>85</i>
<i>course sand, p-gravel & gravel</i>	<i>85</i>	<i>108</i>
<i>clay</i>	<i>108</i>	<i>110</i>

RECEIVED

JUN 15 2003

BY: OLWR

Top of Lap Pipe or Reduction in Casing

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

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.

Charles M. Pickens
Signature of Licensed Driller and License No.
0-0667

6-2-03
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

		K	

SECTION 10

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

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