

**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  
**H-65**

CODED  
**S-144**

DATE WELL COMPLETED  
**3-24-04**

PERMIT NUMBER  
**GW-39614**

NAME OF DRILLING FIRM  
**Irrigation Equipment Inc.**

**Indianola, MS**

NAME & MAILING ADDRESS OF LANDOWNER  
**Kent Hilburn MS mudd, Inc**  
**15 Valcourt Place**  
**Woodlands, TX 77382**

Latitude:  
Longitude:

WELL LOCATION: SEC **25** TOWNSHIP **14N** RANGE **9W**  
**SE/SE** **NW/NW** **S** **SW** **W**

DISTANCE \_\_\_\_\_ MILES DIRECTION **NW** NEAREST TOWN **Glen Allan**

OTHER LANDMARK

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

**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 **60**

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Clay	0	28
Fine Sand	29	35
Fine Sand/gravel	36	71
Med. Sand/gravel	72	85
Med. Sand	86	95
Med. Sand/gravel	96	113
Clay	114	115

**WELL DATA**

Well Depth <b>115</b>	Casing Diameter (In.) <b>16</b>	Casing Length (Ft.) <b>85</b>
Type of Casing <b>pvc</b>	Hole Depth <b>115</b>	Depth to Static Water Level <b>10ft.</b>
TYPE OF COMPLETION: (Circle One or More): <b>Gravel Packed,</b> Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) _____		
WELL GROUTED TO A DEPTH OF <b>10</b> FEET Type Grout (circle one): Cement, <b>Bentonite</b> , or Mix		

**SCREEN DATA**

Diameter - Inches <b>16</b>	Length - Feet <b>30</b>	Slot Size - Inches <b>.050</b>
Screen Type <b>pvc</b>	Depth to Bottom - Feet	

Screen 76-85  
Screen 96-115

**RECEIVED**  
**APR 05 2004**  
**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.

 \_\_\_\_\_ 0439  
Signature of Licensed Driller and License No.

\_\_\_\_\_ 3-31-04  
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

X			

SECTION 13

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
2500 to 3000	1	60 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.