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: WAYNE	
WELL NUMBER: 9	CODED:
2110	
DATE WELL COMPLETED: 5/12/94	

PERMIT NUMBER: 285
NAME OF DRILLING FIRM: CARL'S WELL SER
BUCKATUNNA, MS.

NAME & MAILING ADDRESS OF LANDOWNER
GEORGE T. DICKERSON
824 POU DR.
WAYNESBORO, MS. 39367

WELL LOCATION: SEC 6 TOWNSHIP 8S (N/S) RANGE 6 (E/W)

DISTANCE ____ Miles DIRECTION ____ of NEAREST TOWN ____

OTHER LANDMARK: CITY LIMIT WAYNESBORO

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, Diesel, Gasoline, Butane, Other (Describe) ____ H/P 1

Pump Capacity (GPM)	No. of Stages	Setting Depth
20	10	115 FT.

PUMP TEST

Well yielded 30 GPM with a drawdown of NONE ft. after 1 hours of pumping

WELL DATA

Well Depth	Casing Diameter (In.)	Casing Length (Ft.)
180	4"	147

Type of Casing	Hole Depth	Depth to Static Water Level
PVC	180	34

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

WELL GROUTED TO A DEPTH OF 20 FEET
Type Grout (circle one): Cement, Bentonite, or Mix

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

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

SCREEN DATA

Diameter - Inches	Length - Feet	Slot Size - Inches
OPEN HOLE		

Screen Type	Depth to Bottom - Feet

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
TOP SOIL SR. CLAY	0	15
CR. SD.	15	32
GR. CLAY	32	40
BL. "	40	68
ROCK STRATUM	68	100
GR. CLAY	100	147
ROCK	147	180

FORMATIONS (Continued)	FROM	TO

RECEIVED
JUN 06 1994
Dept. of Environmental Quality
Office of Land & Water Resources

IF MORE SPACE IS NEEDED, USE BACK

If well telescopes please
sketch and show depths.

GROUND LEVEL

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

SECTION _____

Please indicate well location X.

ADDITIONAL INFORMATION