

**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 WEBSTER	
WELL NUMBER 4-31	CODED
E-LOG - 061	
DATE WELL COMPLETED 10-23-1984	

PERMIT NUMBER GW 857
NAME OF DRILLING FIRM SW WEBB

NAME & MAILING ADDRESS OF LANDOWNER MT. ZION WATER ASSO.			
Latitude: Longitude:			
WELL LOCATION. SEC	TOWNSHIP	RANGE	
30	20	N 10	EW
DISTANCE	DIRECTION	NEAREST TOWN	
	Miles	of	
OTHER LANDMARK			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.			

PUMP DATA		
PUMP TYPE (Circle One):		
Submersible, <input type="radio"/>	Turbine, <input checked="" type="radio"/>	Jet <input type="radio"/> Flowing Well, <input type="radio"/>
Other (Describe) _____		
POWER TYPE (Circle One):		
Electric, <input checked="" type="radio"/>	Tractor, <input type="radio"/>	Diesel, <input type="radio"/> Gasoline, <input type="radio"/> Butane, <input type="radio"/>
Other (Describe) _____ H/P <u>20</u>		
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO

WELL DATA

Well Depth 400	Casing Diameter (In.) 10	Casing Length (Ft.) 336
Type of Casing S	Hole Depth 400	Depth to Static Water Level 192
TYPE OF COMPLETION: (Circle One or More):		
Gravel Packed, <input type="checkbox"/>	Underreamed, <input type="checkbox"/>	Telescoped, <input type="checkbox"/>
Natural Development, <input type="checkbox"/>	Open Hole, <input type="checkbox"/>	Other (Describe) _____
WELL GROUTED TO A DEPTH OF _____ FEET		
Type Grout (circle one): Cement, Bentonite, or Mix		

SCREEN DATA

Diameter - Inches 6	Length - Feet 336 30	Slot Size - Inches .020
Screen Type SS	Depth to Bottom - Feet 192	Top of Last Pipe or Reduction in Casing DO NOT
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.

REMOVED ORIGINALS

Signature of Licensed Driller and License No. _____

Date _____

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

SECTION _____

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.