

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 <u>Wilkinson</u>	
WELL NUMBER <u>1-24</u>	CODED
DATE WELL COMPLETED <u>7-15-03</u>	

PERMIT NUMBER <u>D-600</u>
NAME OF DRILLING FIRM <u>Rayborn Drilling</u>
<u>Atoka, MS</u>

NAME & MAILING ADDRESS OF LANDOWNER <u>Anderson Farms</u>			
<u>111 Summer Haven Ave</u>			
<u>Wilmington, NC 28405</u>			
Latitude: Longitude:			
WELL LOCATION	SEC <u>10</u>	TOWNSHIP <u>02 N</u>	RANGE <u>1 E</u>
DISTANCE <u>6</u> Miles	DIRECTION <u>NE</u>	NEAREST TOWN <u>Woodville</u>	
OTHER LANDMARK			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. <u>Home Well</u>			

PUMP DATA			
PUMP TYPE (Circle One): <input checked="" type="radio"/> Submersible Turbine, Jet, Flowing Well, Other (Describe) _____			
POWER TYPE (Circle One): <input checked="" type="radio"/> Electric Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P <u>1</u>			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Clay	0	40
Gravel	40	55
Clay	55	130
Fine sand & shell	130	150
Fine sand & streaks of clay	150	250
Med Sand	250	290

WELL DATA

Well Depth <u>290</u>	Casing Diameter (In.) <u>4"</u>	Casing Length (Ft.) <u>270</u>
Type of Casing <u>PVC</u>	Hole Depth <u>290</u>	Depth to Static Water Level <u>110'</u>
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="checkbox"/> 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 <u>10</u> FEET
Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

Diameter - Inches <u>4</u>	Length - Feet <u>20</u>	Slot Size - Inches <u>.010</u>
Screen Type <u>PVC</u>	Depth to Bottom - Feet <u>290</u>	

Top of Lap Pipe or Reduction in Casing
FEET <input type="checkbox"/> IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

RECEIVED

AUG 04 2003

BY: OLWR

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.

Ray 0-60
Signature of Licensed Driller and License No.

7-28-03
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

			X

SECTION 10

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth	
10	15	150	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.