

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Office of Land and Water Resources

P. O. Box 10631
Jackson, MS 39289-0631
WATER WELL DRILLERS LOG

COUNTY WHERE LOCATED
LITMIS COOL

WELL NUMBER
K-506 CODED

DATE WELL COMPLETED
04-21-03

PERMIT NUMBER

NAME OF DRILLING FIRM
NECAFE WELL

NAME & MAILING ADDRESS OF LANDOWNER
**GM&R
DEBR ST
DAY ST LOUIS MS**

Latitude:

Longitude:

WELL LOCATION. SEC **27** TOWNSHIP **8 S** RANGE **14 E**

DISTANCE **3** Miles DIRECTION **W** of NEAREST TOWN **DAY ST LOUIS**

OTHER LANDMARK

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 _____

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
MUD	0	20
B CLAY	20	40
SAND	40	50
B CLAY	50	210
SAND	210	220
B CLAY	220	235
SAND	235	255

WELL DATA

Well Depth **255** Casing Diameter (In.) **2** Casing Length (Ft.) **245**

Type of Casing **PVC** Hole Depth **255** Depth to Static Water Level **5**

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 **2** Length - Feet **10** Slot Size - Inches **006**

Screen Type **PVC** Depth to Bottom - Feet **255**

RECEIVED

OCT 02 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.

Robert **0660**

Signature of Licensed Driller and License No.

9/15/03

Date

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.
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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.