

**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 <b>HANCOCK</b>	
WELL NUMBER <b>K-2950</b>	CODED
DATE WELL COMPLETED <b>9-5-01</b>	

PERMIT NUMBER
NAME OF DRILLING FIRM <b>M+M WELL SERV.</b>

NAME & MAILING ADDRESS OF LANDOWNER <b>TIM GANSERT</b> <b>6060 5th St.</b> <b>BAY St. Louis, MS. 39520</b>			
Latitude: Longitude:			
WELL LOCATION	SEC <b>28</b>	TOWNSHIP <b>8 N</b>	RANGE <b>14 E</b>
DISTANCE	DIRECTION	NEAREST TOWN	
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 1

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<del>0-5 ft.</del>		
<b>SAND</b>	<b>0</b>	<b>5</b>
<b>CLAY (ORANGE)</b>	<b>5</b>	<b>17</b>
<b>SAND</b>	<b>17</b>	<b>30</b>
<b>CLAY (GREY)</b>	<b>30</b>	<b>75</b>
<b>SAND</b>	<b>75</b>	<b>100</b>
<b>CLAY (GREEN)</b>	<b>100</b>	<b>215</b>
<b>SAND</b>	<b>215</b>	<b>250</b>

Top of Lap Pipe or Reduction in Casing

**FEET**  IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

**WELL DATA**

Well Depth <b>250'</b>	Casing Diameter (In.) <b>2"</b>	Casing Length (Ft.) <b>240'</b>
Type of Casing <b>PVC</b>	Mole Depth <b>250'</b>	Depth to Static Water Level <b>12'</b>
TYPE OF COMPLETION: (Circle One or More): Gravel Packed, Underreamed, Telescoped, <u>Natural Development</u> , Open Hole, Other (Describe) _____		

WELL GROUTED TO A DEPTH OF 10 FEET  
Type Grout (circle one): Cement Bentonite, or Mix

**SCREEN DATA**

Diameter - Inches <b>2"</b>	Length - Feet <b>10'</b>	Slot Size - Inches <b>.006</b>
Screen Type <b>PVC</b>	Depth to Bottom - Feet <b>240'-250'</b>	

**REC'D SEP 27 2001**

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.

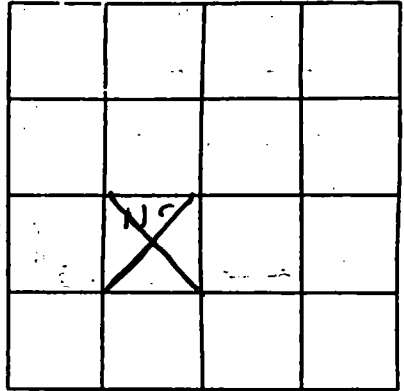
*Alex Noble 0563*  
Signature of Licensed Driller and License No.

9-24-01  
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.
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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.