

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 <i>Harrison</i>	
WELL NUMBER <i>D-63</i>	CODED
DATE WELL COMPLETED <i>10-8-03</i>	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Crystal Drilling Service Co.</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Steve Wilkerson</i>			
<i>Old Belair Hwy</i>			
Latitude:			
Longitude:			
WELL LOCATION	SEC <i>9</i>	TOWNSHIP <i>59</i>	RANGE <i>10</i>
DISTANCE <i>20</i> Miles	DIRECTION <i>N</i>	NEAREST TOWN <i>Belair</i>	
OTHER LANDMARK			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. <i>Home</i>			

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

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Top Soil</i>	<i>1</i>	<i>8</i>
<i>Red sand</i>	<i>8</i>	<i>40</i>
<i>soft blue clay</i>	<i>40</i>	<i>110</i>
<i>Blue clay</i>	<i>110</i>	<i>170</i>
<i>white sand</i>	<i>170</i>	<i>290</i>
<i>soft blue clay</i>	<i>290</i>	<i>460</i>
<i>hard blue clay</i>	<i>460</i>	<i>530</i>
<i>fine sand</i>	<i>530</i>	<i>600</i>
<i>good sand</i>	<i>600</i>	<i>640</i>
<i>coarse white sand</i>	<i>640</i>	<i>685</i>

WELL DATA		
Well Depth <i>685</i>	Casing Diameter (in.) <i>2"</i>	Casing Length (ft.) <i>675</i>
Type of Casing <i>P.V.C</i>	Hole Depth <i>685</i>	Depth to Static Water Level <i>40</i>
TYPE OF COMPLETION: (Circle One or More): Gravel Packed, Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) _____		
WELL GROUTED TO A DEPTH OF <u>15</u> FEET Type Grout (circle one): Cement, Bentonite, or Mix		

SCREEN DATA		
Diameter - Inches <i>2"</i>	Length - Feet <i>10'</i>	Slot Size - Inches <i>.004</i>
Screen Type <i>P.V.C</i>	Depth to Bottom - Feet <i>685</i>	

RECEIVED	
NOV 10 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.

David Mason 0209
Signature of Licensed Driller and License No.

11-4-03
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

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[Handwritten notes and sketches in the well log column]

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SECTION _____

Please indicate well location X.

Pump Capacity (GPM) <u>7</u>	No. of Stages <u>2</u>	Setting Depth <u>80</u> FT.
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PUMP TEST *[initials]*

Well yielded 7 GPM with a drawdown of 0 ft. after 2 hours of pumping

LOG DATA

TYPE OF LOG RUN (Circle One): No Log Run. Electric. Gamma Ray. Density. Sonic. Neutron. Other (Describe) OT

Name of Organization Running Log [Handwritten]

GEOLOGIC DATA (Office Use Only)

Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test

Driller's Remarks *[Handwritten]*

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