

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
Harrison

WELL NUMBER
G-474

CODED

DATE WELL COMPLETED
6-3-03

PERMIT NUMBER

NAME OF DRILLING FIRM
Coastal Drilling Service Co.

NAME & MAILING ADDRESS OF LANDOWNER
Jerry Scarborough
12356 Cox Rd. Spt.

Latitude:

Longitude:

WELL LOCATION. SEC 3E TOWNSHIP 6S RANGE 11E

DISTANCE _____ MILES DIRECTION _____ NEAREST TOWN Gulfport

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
<u>top soil</u>	<u>1</u>	<u>2</u>
<u>red clay</u>	<u>2</u>	<u>15</u>
<u>sugar sand</u>	<u>15</u>	<u>25</u>
<u>soft blue clay</u>	<u>25</u>	<u>200</u>
<u>hard blue clay</u>	<u>200</u>	<u>220</u>
<u>fine water sand</u>	<u>220</u>	<u>240</u>
<u>hard blue clay</u>	<u>240</u>	<u>260</u>
<u>good water sand</u>	<u>260</u>	<u>280</u>

WELL DATA

Well Depth <u>280'</u>	Casing Diameter (In.) <u>2 inch</u>	Casing Length (Ft.) <u>270'</u>
Type of Casing <u>PVC</u>	Hole Depth <u>280'</u>	Depth to Static Water Level <u>60'</u>

TYPE OF COMPLETION: (Circle One or More):
Gravel Packed Underreamed, Telescoped,
Natural Development Open Hole, Other
(Describe) _____

WELL GROUTED TO A DEPTH OF 15 FEET
Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

Diameter - inches <u>2"</u>	Length - Feet <u>10'</u>	Slot Size - inches <u>.006</u>
Screen Type <u>PVC</u>	Depth to Bottom - Feet <u>280'</u>	

RECEIVED

JUL 31 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.

Deft Mack 0-209
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 _____

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth	
7	2	80'	FT.

PUMP TEST

Well yielded 7 GPM with
a drawdown of 8 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) _____

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.