

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
ANDERSON

WELL NUMBER **G-477** CODED

DATE WELL COMPLETED
04-28-03

PERMIT NUMBER

NAME OF DRILLING FIRM
NECAISE WELLS

NAME & MAILING ADDRESS OF LANDOWNER
**D'COLT HOMES
MARK WOST
GRT MS 39503**

Latitude:
Longitude:

WELL LOCATION: SEC **29** TOWNSHIP **6** RANGE **11** E

DISTANCE **1** Miles DIRECTION **NW** of NEAREST TOWN **LYMAN**

OTHER LANDMARK

WELL PURPOSE (Home, Irrigation, Municipal, Industrial, Fish Pond, etc.)
Home

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	30
BCLAY	30	45
SAND	45	50
BCLAY	50	100
SAND	100	120

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

WELL DATA

Well Depth 120	Casing Diameter (In.) 2	Casing Length (Ft.) 110
Type of Casing PVC	Hole Depth 120	Depth to Static Water Level 29

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 000
Screen Type PVC	Depth to Bottom - Feet 120	

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 A. [Signature] **0660**
Signature of Licensed Driller and License No.

9-15-03
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.