

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>G-489</i>	CODED
DATE WELL COMPLETED <i>4-8-04</i>	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Coastal Drilling Service CO</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Ms Koslen</i> <i>13280 Seann Street</i>
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Latitude:
Longitude:

WELL LOCATION	SEC <i>34</i>	TOWNSHIP <i>6</i>	RANGE <i>11</i>	E
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DISTANCE <i>New Part of</i>	DIRECTION <i>of</i>	NEAREST TOWN <i>Dept</i>
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) 1 H/P _____

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Top Soil</i>	<i>1</i>	<i>5</i>
<i>Red clay</i>	<i>5</i>	<i>20</i>
<i>White sand</i>	<i>20</i>	<i>190</i>
<i>Pipe clay</i>	<i>140</i>	<i>170</i>
<i>Blue clay</i>	<i>170</i>	<i>210</i>
<i>Red sand</i>	<i>210</i>	<i>250</i>
<i>Pipe clay</i>	<i>250</i>	<i>270</i>
<i>fine sand</i>	<i>270</i>	<i>290</i>
<i>Coarse sand</i>	<i>290</i>	<i>300</i>

WELL DATA

Well Depth <i>300</i>	Casing Diameter (In.) <i>2"</i>	Casing Length (Ft.) <i>290</i>
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Type of Casing <i>PVC</i>	Hole Depth <i>300</i>	Depth to Static Water Level <i>40</i>
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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 <i>2"</i>	Length - Feet <i>10'</i>	Slot Size - Inches <i>.006</i>
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Screen Type <i>PVC</i>	Depth to Bottom - Feet <i>300</i>
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RECEIVED

MAY 06 2004

BY: OLWR

Top of Lap Pipe or Reduction in Casing

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

Dr. J. W. ...
Signature of Licensed Driller and License No. *0-209*

5-2-04
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
<u>15</u>	<u>1</u>	<u>60</u> FT.
PUMP TEST		
Well yielded <u>15</u> GPM with a drawdown of <u>0</u> ft. after <u>2</u> hours of pumping		

LOG DATA

TYPE OF LOG RUN (Circle One): Electric, Gamma Ray, Density, Sonic, Neutron, Other (Describe) <u> </u>	No Log Run.
Name of Organization Running Log <u> </u>	

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.