

**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 CODED  
**H-482**

DATE WELL COMPLETED  
**1-16-04**

PERMIT NUMBER

NAME OF DRILLING FIRM  
**Coast Water Well Service**

NAME & MAILING ADDRESS OF LANDOWNER  
**Chad Arby**  
**RiverPoint DR.**

Latitude:  
Longitude: **Biloxi, MS 39532**

WELL LOCATION: SEC **21** TOWNSHIP **6 S** RANGE **9 E**

DISTANCE DIRECTION NEAREST TOWN  
**4** Miles **NORTH** of **Biloxi**

OTHER LANDMARK

WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.

**PUMP DATA**

PUMP TYPE (Circle One):  
Submersible, Turbine,  **Je** Flowing Well,  
Other (Describe) \_\_\_\_\_

POWER TYPE (Circle One):  
 Electric, Tractor, Diesel, Gasoline, Butane,  
Other (Describe) \_\_\_\_\_ H/P **1**

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<b>Top Soil</b>	<b>0</b>	<b>2</b>
<b>orange clay</b>	<b>2</b>	<b>7 1/2</b>
<b>white sand</b>	<b>7 1/2</b>	<b>40</b>
<b>Blue Clay</b>	<b>40</b>	<b>212</b>
<b>Grey Med. &amp; coarse sand</b>	<b>212</b>	<b>352</b>

**RECEIVED**  
**JAN 28 2004**  
**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 <b>252'</b>	Casing Diameter (In.) <b>2"</b>	Casing Length (Ft.) <b>242'</b>
Type of Casing <b>PVC</b>	Hole Depth <b>252'</b>	Depth to Static Water Level <b>45'</b>

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 <b>2"</b>	Length - Feet <b>10'</b>	Slot Size - inches <b>.006</b>
Screen Type <b>PVC</b>	Depth to Bottom Feet <b>252'</b>	

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.

**John Riddell 472**  
Signature of Licensed Driller and License No.

**1-28-04**  
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

		X	

SECTION 21

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
8	2	
		FT.
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.