

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 HARDING	
WELL NUMBER J-2356	CODED
DATE WELL COMPLETED 9-10-01	

PERMIT NUMBER
NAME OF DRILLING FIRM Necaise Well Serv.
Gulfport, MS

NAME & MAILING ADDRESS OF LANDOWNER William Burkett 12165 Walker Rd Pass Christian MS
Latitude: Longitude:
WELL LOCATION. SEC TOWNSHIP RANGE 6 7 N 13 E
DISTANCE DIRECTION NEAREST TOWN 5 Miles NW of NE 132 E
OTHER LANDMARK
WELL PURPOSE: <input checked="" type="checkbox"/> Home, <input type="checkbox"/> Irrigation, <input type="checkbox"/> Municipal, <input type="checkbox"/> Industrial, <input type="checkbox"/> Fish Pond, etc.

PUMP DATA	
PUMP TYPE (Circle One): Submersible, Turbine, <u>Jet</u> , Flowing Well, Other (Describe) _____	
POWER TYPE (Circle One): <u>Electric</u> , Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P <u>1</u>	

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
MUD	0	20
SAND	20	40
MUD	40	60
CLAY	60	70
SAND (G) FINE	70	90
B. CLAY	90	120
SAND (G) FINE	120	140
B. CLAY	140	145
SAND	145	160
B. CLAY	160	270
(WELL)	270	290

WELL DATA		
Well Depth 285	Casing Diameter (In.) 2	Casing Length (Ft.) 275
Type of Casing PVC	Hole Depth 285	Depth to Static Water Level 48
TYPE OF COMPLETION: (Circle One or More): Gravel Packed, <u>Underreamed</u> , Telescoped, Natural Development, Open Hole, Other (Describe) _____		

WELL GROUTED TO A DEPTH OF <u>10</u> FEET Type Grout (circle one): Cement, Bentonite, or <u>Mix</u>
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SCREEN DATA		
Diameter - Inches 2	Length - Feet 10	Slot Size - Inches .006
Screen Type PVC	Depth to Bottom - Feet 285	

RECEIVED	
JUL 11 2002	
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.

Robert A. [Signature] 0-6600
Signature of Licensed Driller and License No.

9-30-01
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):
 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.