

**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<br><b>Harrison</b> |       |
| WELL NUMBER<br><b>R 2203</b>           | CODED |
| DATE WELL COMPLETED<br><b>1-21-97</b>  |       |

|   |
|---|
| PERMIT NUMBER<br><b>0-239</b>           |
| NAME OF DRILLING FIRM<br><b>McGrill</b> |

|   |                 |              |           |
|---|-----------------|--------------|-----------|
| NAME & MAILING ADDRESS OF LANDOWNER<br><b>Jack Tucker</b>   |                 |              |           |
| <b>20235 Noyes Rd</b>   |                 |              |           |
| <b>Lone Beach, Ms.</b>  |                 |              |           |
| WELL LOCATION   | SEC             | TOWNSHIP     | RANGE     |
|   | <b>28</b>       | <b>7</b>     | <b>12</b> |
|   |                 | <b>S</b>     | <b>E</b>  |
| DISTANCE  | DIRECTION       | NEAREST TOWN |           |
| <b>1</b> Miles  | <b>South</b> of | <b>I-10</b>  |           |
| OTHER LANDMARK  |                 |              |           |
| WELL PURPOSE: <input checked="" type="radio"/> Home, <input type="radio"/> Irrigation, <input type="radio"/> Municipal, <input type="radio"/> Industrial, <input type="radio"/> Fish Pond, etc. |                 |              |           |

|   |                           |                                 |
|---|---------------------------|---------------------------------|
| <b>PUMP DATA</b>  |                           |                                 |
| PUMP TYPE (Circle One):<br>Submersible, Turbine, <input checked="" type="radio"/> <b>Jet</b> Flowing Well,<br>Other (Describe) _____                  |                           |                                 |
| POWER TYPE (Circle One):<br><input checked="" type="radio"/> <b>Electric</b> , Tractor, Diesel, Gasoline, Butane,<br>Other (Describe) _____ H/P _____ |                           |                                 |
| Pump Capacity (GPM)<br><b>15</b>  | No. of Stages<br><b>2</b> | Setting Depth<br><b>600</b> FT. |
| PUMP TEST   |                           |                                 |
| Well yielded <b>10</b> GPM with<br>a drawdown of _____ ft.<br>after <b>1</b> hours of pumping   |                           |                                 |

|                              |                                    |  |
|------------------------------|------------------------------------|--|
| <b>WELL DATA</b>             |                                    |  |
| Well Depth<br><b>640'</b>    | Casing Diameter (In.)<br><b>2"</b> | Casing Length (Ft.)<br><b>620</b>        |
| Type of Casing<br><b>PUC</b> | Hole Depth<br><b>640</b>           | Depth to Static Water Level<br><b>30</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

|                                |                                      |                                   |
|--------------------------------|--------------------------------------|-----------------------------------|
| <b>SCREEN DATA</b>             |                                      |                                   |
| Diameter - Inches<br><b>2"</b> | Length - Feet<br><b>20</b>           | Slot Size - Inches<br><b>.006</b> |
| Screen Type<br><b>pvc</b>      | Depth to Bottom - Feet<br><b>620</b> |                                   |

|   |  |
|---|--|
| <b>LOG DATA</b>   |  |
| TYPE OF LOG RUN (Circle One):<br>Electric, Gamma Ray, Density, Sonic, <input checked="" type="radio"/> <b>No Log Run</b> , Neutron,<br>Other (Describe) _____ |  |
| Name of Organization Running Log  |  |

| <b>GEOLOGIC DATA (Office Use Only)</b> |               |                |              |
|--|---------------|----------------|--------------|
| Surface Elev.                          | Geologic Unit | Unit Thickness | Depth to Top |
| Subs. SWL                              | Date          | Analysis       | Aquifer Test |

Driller's Remarks

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**Top of Lap Pipe or Reduction in Casing**

**FEET** IF TELESKOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM       | TO         | FORMATIONS (Continued) | FROM | TO |
|---------------------------------------|------------|------------|------------------------|------|----|
| <b>Sand</b>                           | <b>0</b>   | <b>20</b>  |                        |      |    |
| <b>mud</b>                            | <b>20</b>  | <b>500</b> |                        |      |    |
| <b>sand</b>                           | <b>500</b> | <b>510</b> |                        |      |    |
| <b>mud</b>                            | <b>510</b> | <b>600</b> |                        |      |    |
| <b>sand</b>                           | <b>600</b> | <b>640</b> |                        |      |    |
|                                       |            |            |                        |      |    |
|                                       |            |            |                        |      |    |
|                                       |            |            |                        |      |    |
|                                       |            |            |                        |      |    |
|                                       |            |            |                        |      |    |
|                                       |            |            |                        |      |    |
|                                       |            |            |                        |      |    |
|                                       |            |            |                        |      |    |
|                                       |            |            |                        |      |    |

**RECEIVED**

**MAR 17 1997**

Dept. of Environmental Quality  
Office of Land & Water Resources

IF MORE SPACE IS NEEDED, USE BACK

If well telescopes please sketch and show depths.

GROUND LEVEL

|  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

SECTION \_\_\_\_\_

Please indicate well location X.

ADDITIONAL INFORMATION

If more than one screen, show location of each on sketch.