

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 M-813	CODED
DATE WELL COMPLETED 6-20-03	

PERMIT NUMBER
NAME OF DRILLING FIRM Coast Water Well Service

NAME & MAILING ADDRESS OF LANDOWNER Kerry Thompson Woolmarket Rd.			
Latitude:			
Longitude: Woolmarket, Ms			
WELL LOCATION	SEC	TOWNSHIP	RANGE
	4	7	10
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, <input checked="" type="radio"/> Flowing Well, Other (Describe) _____	
POWER TYPE (Circle One): <input checked="" type="radio"/> Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P <u>2</u>	

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Top Soil	0	2
Orange Clay	2	17
White coarse sand	17	32
Blue Clay	32	120
Medium Sand	120	180
Blue Clay w/ streak sand	180	400
Gray coarse sand	400	520
Blue Clay	520	687
Gray coarse sand	687	720

WELL DATA		
Well Depth 720	Casing Diameter (In.) 2"	Casing Length (Ft.) 705'
Type of Casing PVC	Hole Depth 728'	Depth to Static Water Level 65'
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 15'	Slot Size - Inches .008
Screen Type PVC	Depth to Bottom - Feet 720'	

RECEIVED	
JUL 10 2003	
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.

Jack Pettrell 472
Signature of Licensed Driller and License No.

7/5/03
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

		X	

SECTION 24

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth	FT.
<u>11</u>	<u>3</u>		

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.