

**MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY**  
Bureau 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>M 2547</i>	CODED
DATE WELL COMPLETED <i>7-27-93</i>	

PERMIT NUMBER <i>0404</i>
NAME OF DRILLING FIRM <i>Lyman Well Co.</i>
<i>Hueport Ms.</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>T.O. Peters Jr.</i>			
<i>5075 Road 536</i>			
<i>Biloxi MS39533</i>			
WELL LOCATION:	SEC	TOWNSHIP	RANGE
	<i>1</i>	<i>7 N</i>	<i>10 E</i>
DISTANCE	DIRECTION	NEAREST TOWN	
_____ Miles	_____	_____	
OTHER LANDMARK			
WELL PURPOSE <u>Home</u> Irrigation, Municipal, Industrial, Fish Pond, etc.			

<b>PUMP DATA</b>		
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>		
Pump Capacity (GPM)	No. of Stages	Setting Depth  FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

<b>WELL DATA</b>		
Well Depth <i>307'</i>	Casing Diameter (In.) <i>2"</i>	Casing Length (Ft.)
Type of Casing <i>PVC</i>	Hole Depth	Depth to Static Water Level <i>40'</i>
TYPE OF COMPLETION: (Circle One or More): Gravel Packed, Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) _____		
Top of Lap Pipe or Reduction in Casing  FEET <input type="checkbox"/> IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE		

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

<b>SCREEN DATA</b>		
Diameter - Inches <i>2</i>	Length - Feet <i>10'</i>	Slot Size - Inches
Screen Type <i>PVC</i>		Depth to Bottom - Feet

<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

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO

FORMATIONS ENCOUNTERED	FROM	TO
<b>RECEIVED</b>		
<b>MAR 21 1994</b>		
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

RECEIVED

MAY 11 1984

Office of Water Resources  
Texas Department of Water Resources

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