

**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  
*Jackson*

WELL NUMBER *267* CODED

DATE WELL COMPLETED  
*8-25-97*

PERMIT NUMBER

NAME OF DRILLING FIRM  
*Coast Water Well Service*

NAME & MAILING ADDRESS OF LANDOWNER  
*Robin Parker*

*Robin Parker Rd*

*Pascagoula Ms*

WELL LOCATION SEC TOWNSHIP RANGE  
*NE NW 22 4 6 8*

DISTANCE DIRECTION NEAREST TOWN  
*3 Miles NORTH of WADE*

OTHER LANDMARK

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

**PUMP DATA**

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

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

Pump Capacity (GPM) <i>10</i>	No. of Stages <i>2</i>	Setting Depth _____ FT.
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PUMP TEST

Well yielded \_\_\_\_\_ GPM with  
a drawdown of \_\_\_\_\_ ft.  
after \_\_\_\_\_ hours of pumping

**WELL DATA**

Well Depth <i>335'</i>	Casing Diameter (In.) <i>2"</i>	Casing Length (Ft.) <i>325'</i>
Type of Casing <i>PVC</i>	Hole Depth <i>335'</i>	Depth to Static Water Level <i>2'</i>

**LOG DATA**

TYPE OF LOG RUN (Circle One):  No Log Run,  
Electric, Gamma Ray, Density, Sonic, Neutron,  
Other (Describe) \_\_\_\_\_

Name of Organization Running Log

TYPE OF COMPLETION: (Circle One or More):  
 Gravel Packed,  Underreamed,  Telescoped,  
 Natural Development,  Open Hole,  Other  
(Describe) \_\_\_\_\_

WELL GROUTED TO A DEPTH OF *20* FEET  
Type Grout (circle one): Cement,  Bentonite, or Mix

**GEOLOGIC DATA (Office Use Only)**

Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test

**SCREEN DATA**

Diameter - Inches <i>2"</i>	Length - Feet <i>10'</i>	Slot Size - Inches <i>.008</i>
Screen Type <i>PVC</i>	Depth to Bottom - Feet <i>335'</i>	

Driller's Remarks

Top of Lap Pipe or Reduction in Casing

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

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Top Soil</i>	<i>0</i>	<i>2</i>
<i>Pink Red Clay</i>	<i>2</i>	<i>18</i>
<i>Coarse sand</i>	<i>18</i>	<i>90</i>
<i>Blue Clay</i>	<i>90</i>	<i>270</i>
<i>Coarse sand</i>	<i>270</i>	<i>335</i>

FORMATIONS (Continued)	FROM	TO
<b>RECEIVED</b>		
<b>OCT 27 1997</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

		X	

SECTION 22

Please indicate well location X.

ADDITIONAL INFORMATION

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