

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 C-76	CODED
DATE WELL COMPLETED 5/31/03	

PERMIT NUMBER
NAME OF DRILLING FIRM Pierce Well

NAME & MAILING ADDRESS OF LANDOWNER Don Triplett Davis Schumilt Rd. Moss Point, MS			
Latitude:			
Longitude:			
WELL LOCATION	SEC 42	TOWNSHIP 4	RANGE S 6 E
DISTANCE 1/4 Miles	DIRECTION S	NEAREST TOWN George Co Line	
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, <input checked="" type="radio"/> Jet Flowing Well, Other (Describe) _____	
POWER TYPE (Circle One): <input checked="" type="radio"/> Electric Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P 2	

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Top Soil	0	10
Clay	10	20
good sand	20	35
Clay	35	120
good sand	120	140
Clay	140	320
good sand	320	350

WELL DATA		
Well Depth 350'	Casing Diameter (in.) 2"	Casing Length (EL.) 340'
Type of Casing Plastic	Hole Depth 350'	Depth to Static Water Level 50'
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped, <input checked="" type="checkbox"/> Natural Development, <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other (Describe) _____		
WELL GROUTED TO A DEPTH OF 15 FEET Type Grout (circle one): Cement, Bentonite, or <input checked="" type="radio"/> Mix		

SCREEN DATA		
Diameter - Inches 2"	Length - Feet 10'	Slot Size - Inches 006
Screen Type Plastic	Depth to Bottom - Feet 350'	

RECEIVED	
JUN 11 2003	
BY: OLWR	
Top of Lap Pipe or Reduction In Casing 0 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.

Michael Pierce 0296
Signature of Licensed Driller and License No.

5/31/03
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
10	3	80 FT.
PUMP TEST		
Well yielded <u>10</u> GPM with		
a drawdown of <u>10</u> ft.		
after <u>1</u> 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.