

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 <i>Jackson Co.</i>	
WELL NUMBER <i>D-2267</i>	CODED
DATE WELL COMPLETED <i>8-3-00</i>	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Pierce Well</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Anthony Buckley Harleston Ms Pasca goula, Ms</i>			
WELL LOCATION	SEC	TOWNSHIP	RANGE
	<i>5</i>	<i>4 N</i>	<i>5 E</i>
DISTANCE	DIRECTION	NEAREST TOWN	
<i>1/2</i> Miles	<i>S</i>	<i>Glenn</i>	
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 <i>2</i>		
Pump Capacity (GPM) <i>10</i>	No. of Stages <i>3</i>	Setting Depth <i>120 FT.</i>
PUMP TEST		
Well yielded <i>10</i> GPM with a drawdown of <i>10</i> ft. after <i>1</i> hours of pumping		

WELL DATA

Well Depth <i>340'</i>	Casing Diameter (In) <i>2"</i>	Casing Length (Ft.) <i>330'</i>
Type of Casing <i>Plastic</i>	Hole Depth <i>340'</i>	Depth to Static Water Level <i>100'</i>
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, Mix

SCREEN DATA

Diameter - Inches <i>2"</i>	Length - Feet <i>10'</i>	Slot Size - Inches <i>006</i>
Screen Type <i>Plastic</i>	Depth to Bottom - Feet <i>340</i>	

LOG DATA

TYPE OF LOG RUN (Circle One): Electric, Gamma Ray, Density, Sonic, Neutron, Other (Describe) _____		<input checked="" type="radio"/> No Log Run?
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
Top of Lap Pipe or Reduction in Casing

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Top soil</i>	<i>0</i>	<i>10</i>
<i>Clay</i>	<i>10</i>	<i>20</i>
<i>good Sand</i>	<i>20</i>	<i>30</i>
<i>Clay</i>	<i>30</i>	<i>300</i>
<i>Sand</i>	<i>300</i>	<i>340</i>

FORMATIONS (Continued)	FROM	TO

RECEIVED

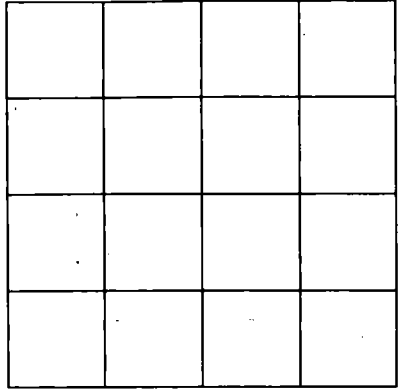
OCT 13 2000

Dept. of Environmental Quality
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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

Area with horizontal lines for providing additional information.

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