

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
COCKBURN

WELL NUMBER CODED
EL 8064

DATE WELL COMPLETED
7-3-02

PERMIT NUMBER

NAME OF DRILLING FIRM
Coast Water Well Service

NAME & MAILING ADDRESS OF LANDOWNER
Karane Sykes
Indian Lane

Latitude:
Longitude: **Vandervee Ms**

WELL LOCATION: SEC **24** TOWNSHIP **5 N** RANGE **8 W**

DISTANCE **6** Miles DIRECTION **NW** of NEAREST TOWN **Vandervee**

OTHER LANDMARK

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

PUMP DATA

PUMP TYPE (Circle One):
Submersible, Turbine, Flowing Well, Other (Describe) _____

POWER TYPE (Circle One):
 Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) **H/P 2**

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
TOP SOIL	0	2
Orange Clay	2	18
Brown Coarse Sand	18	38
White + Blue Clay	38	84
Brown Coarse Sand	84	101
Blue Clay with Silt of Sand	101	760
Gray Coarse Sand	760	840

WELL DATA

Well Depth **840'** Casing Diameter (In.) **2"** Casing Length (Ft.) **825'**

Type of Casing **DVC** Hole Depth **840'** 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, Mix

SCREEN DATA

Diameter - Inches **2"** Length - Feet **15'** Slot Size - Inches **.008**

Screen Type **DVC** Depth to Bottom - Feet **840'**

RECEIVED

AUG 12 2002

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 Hitzdell-472
Signature of Licensed Driller and License No.

7/24/02
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) <u>10</u>	No. of Stages <u>3</u>	Setting Depth _____ FT.
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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.