

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Office of Land and Water Resources

P. O. Box 10631
Jackson, MS 39289-0631
WATER WELL DRILLERS LOG

COUNTY WHERE LOCATED
Jackson

WELL NUMBER
F-167

CODED

DATE WELL COMPLETED
6-26-03

PERMIT NUMBER

NAME OF DRILLING FIRM
Coast Water Well Service

NAME & MAILING ADDRESS OF LANDOWNER
*Becky Stewart
Busby Rd.*

Latitude:
Longitude: *Vandover, Ms*

WELL LOCATION: SEC *8* TOWNSHIP *5 N* RANGE *7 W*

DISTANCE *6* Miles DIRECTION *N 044° E* NEAREST TOWN *Vandover*

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 *2*

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM | TO |
|---------------------------------------|------------|------------|
| <i>Top Soil</i> | <i>0</i> | <i>1</i> |
| <i>Orange Clay</i> | <i>1</i> | <i>18</i> |
| <i>Brown Coarse sand</i> | <i>18</i> | <i>50</i> |
| <i>Blue Clay</i> | <i>50</i> | <i>225</i> |
| <i>Medium Sand</i> | <i>225</i> | <i>217</i> |
| <i>Blue Clay</i> | <i>217</i> | <i>230</i> |
| <i>Gray Medium Coarse sand</i> | <i>230</i> | <i>270</i> |

WELL DATA

Well Depth *270'* Casing Diameter (In.) *2"* Casing Length (Ft.) *255'*

Type of Casing *PVC* Hole Depth *270'* Depth to Static Water Level *130'*

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, or Mix

SCREEN DATA

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

Screen Type *PVC* Depth to Bottom - Feet *270'*

RECEIVED

JUL 10 2003

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 Ridgell, 472
Signature of Licensed Driller and License No.

7/5/03
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

| | | | |
|--|---|--|--|
| | | | |
| | | | |
| | X | | |
| | | | |

SECTION 8

Please indicate well location X.

| | | |
|---------------------------------|---------------------------|---|
| Pump Capacity (GPM) <u>6</u> | No. of Stages <u>3</u> | Setting Depth FT. |
|---------------------------------|---------------------------|---|

PUMP TEST

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

LOG DATA

TYPE OF LOG RUN (Circle One): No Log Rdn.
 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.