

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 CODED
F 2306

DATE WELL COMPLETED
10-22-96

PERMIT NUMBER

NAME OF DRILLING FIRM
Coast Water Well Service

NAME & MAILING ADDRESS OF LANDOWNER
Bruen Campbell
Longleaf Drive
Vanclave, MS

WELL LOCATION SEC TOWNSHIP RANGE
28 5 7 E

DISTANCE DIRECTION NEAREST TOWN
6 Miles *NORTH* of *Vanclave*

OTHER LANDMARK

WELL PURPOSE 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*

Pump Capacity (GPM) No. of Stages Setting Depth
7 2 FT.

PUMP TEST

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

WELL DATA

Well Depth Casing Diameter (In.) Casing Length (Ft.)
290' 2" 280'

Type of Casing Hole Depth Depth to Static Water Level
PVC 290' 110'

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

LOG DATA

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

Name of Organization Running Log

SCREEN DATA

Diameter - Inches Length - Feet Slot Size - Inches
2" 10' .008

Screen Type Depth to Bottom - Feet
PVC 290'

GEOLOGIC DATA (Office Use Only)

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

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Top Soil</i>	<i>0</i>	<i>2</i>
<i>Red Clay</i>	<i>2</i>	<i>18</i>
<i>Coarse Sand</i>	<i>18</i>	<i>30</i>
<i>Purple & gray clay</i>	<i>30</i>	<i>60</i>
<i>Med. Sand</i>	<i>60</i>	<i>130</i>
<i>Blue Clay</i>	<i>130</i>	<i>253</i>
<i>Med. Coarse Sand</i>	<i>253</i>	<i>290</i>

Driller's Remarks

Top of Lap Pipe or Reduction in Casing

IF TELESOPED OR MORE THAN FEET AN OPEN TEST MUST BE RUN

FORMATION FROM TO

RECEIVED

NOV 14 1996

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 28

Please indicate well location X.

ADDITIONAL INFORMATION

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