

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</i> | |
| WELL NUMBER | CODED |
| <i>F 2367</i> | |
| DATE WELL COMPLETED | |
| <i>10-23-98</i> | |

| |
|----------------------------------|
| PERMIT NUMBER |
| |
| NAME OF DRILLING FIRM |
| <i>Coast. Water Well Service</i> |

| | | | |
|---|-----------|---------------------|----------|
| NAME & MAILING ADDRESS OF LANDOWNER | | | |
| <i>Nathan Sentelle</i> | | | |
| <i>Old River Rd.</i> | | | |
| <i>Vancleave, Ms.</i> | | | |
| WELL LOCATION | SEC | TOWNSHIP | RANGE |
| | <i>11</i> | <i>5</i> | <i>7</i> |
| DISTANCE | DIRECTION | NEAREST TOWN | |
| <i>6</i> Miles | <i>N</i> | of <i>VANCLEAVE</i> | |
| OTHER LANDMARK | | | |
| WELL PURPOSE <input checked="" type="radio"/> Home Irrigation, Municipal, Industrial, Fish Pond, etc. | | | |

| | | |
|--|---------------|---------------|
| PUMP DATA | | |
| PUMP TYPE (Circle One): Submersible, Turbine, <input checked="" type="radio"/> Jet, <input type="radio"/> 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) | No. of Stages | Setting Depth |
| <i>6</i> | <i>3</i> | _____ 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.) |
| <i>231'</i> | <i>2"</i> | <i>221'</i> |
| Type of Casing | Hole Depth | Depth to Static Water Level |
| <i>PVC</i> | <i>231'</i> | <i>125'</i> |

| | |
|---|--|
| LOG DATA | |
| TYPE OF LOG RUN (Circle One): Electric, Gamma Ray, Density, Sonic, <input checked="" type="radio"/> Neutron, Other (Describe) _____ | |
| Name of Organization Running Log | |

| | | |
|---|--|--|
| TYPE OF COMPLETION: (Circle One or More): <input checked="" type="radio"/> Gravel Packed, <input type="radio"/> Underreamed, <input type="radio"/> Telescoped, <input checked="" type="radio"/> Natural Development, <input type="radio"/> Open Hole, <input type="radio"/> Other (Describe) _____ | | |
|---|--|--|

| | | | |
|---------------------------------|---------------|----------------|--------------|
| GEOLOGIC DATA (Office Use Only) | | | |
| Surface Elev. | Geologic Unit | Unit Thickness | Depth to Top |
| Subs. SWL | Date | Analysis | Aquifer Test |

| |
|--|
| WELL GROUTED TO A DEPTH OF <i>2</i> FEET |
| Type Grout (circle one): Cement, <input checked="" type="radio"/> Bentonite or Mix |

| | | | |
|--|--|--|--|
| Driller's Remarks | | | |
| Top of Lap Pipe or Reduction in Casing | | | |
| FEET | IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE | | |

| | | |
|-------------------|------------------------|--------------------|
| SCREEN DATA | | |
| Diameter - Inches | Length - Feet | Slot Size - Inches |
| <i>2"</i> | <i>10'</i> | <i>.008</i> |
| Screen Type | Depth to Bottom - Feet | |
| <i>PVC</i> | <i>231'</i> | |

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM | TO |
|---------------------------------------|------------|------------|
| <i>Top Soil</i> | <i>0</i> | <i>3</i> |
| <i>Orange Red clay</i> | <i>3</i> | <i>18</i> |
| <i>Coarse sand</i> | <i>18</i> | <i>64</i> |
| <i>Red gray blue clay</i> | <i>64</i> | <i>112</i> |
| <i>Fine sand</i> | <i>112</i> | <i>118</i> |
| <i>Blue clay</i> | <i>118</i> | <i>130</i> |
| <i>Fine sand</i> | <i>130</i> | <i>208</i> |
| <i>Blue clay</i> | <i>208</i> | <i>208</i> |
| <i>Coarse sand</i> | <i>208</i> | <i>231</i> |

| FORMATIONS (Continued) | FROM | TO |
|--|------|----|
| RECEIVED | | |
| JAN 25 1999 | | |
| 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 11

Please indicate well location X.

ADDITIONAL INFORMATION

RECEIVED

Office of Land & Water Resources
Dept of Environmental Quality

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