

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 <u>Jackson</u>
WELL NUMBER CODED <u>W-2498</u>
DATE WELL COMPLETED <u>7-17-02</u>

PERMIT NUMBER
NAME OF DRILLING FIRM <u>Coast Water Well Service</u>

NAME & MAILING ADDRESS OF LANDOWNER
Richard Grantham
Oak Place

Latitude: _____
Longitude: Vance, Ms

WELL LOCATION. SEC 21 TOWNSHIP 5 N RANGE 7 E

DISTANCE 4 1/2 MILES DIRECTION North NEAREST TOWN Vance

OTHER LANDMARK

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

PUMP DATA

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

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

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
TOP Soil	0	2
Orange Clay	2	18
White Coarse Sand	18	35
Orange Clay	35	60
Blue coarse Sand	60	110
Blue Clay	110	234
Gray Coarse Sand	234	273

WELL DATA

Well Depth <u>273'</u>	Casing Diameter (In.) <u>2"</u>	Casing Length (Ft.) <u>263'</u>
Type of Casing <u>DVC</u>	Hole Depth <u>273'</u>	Depth to Static Water Level <u>105'</u>

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 <u>2"</u>	Length - Feet <u>10'</u>	Slot Size - Inches <u>.008</u>
Screen Type <u>PVC</u>	Depth to Bottom - Feet <u>273'</u>	

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 Reddell-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 21

Please indicate well location X.

Pump Capacity (GPM) <u>8</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): Electric, Gamma Ray, Density, Sonic, <u>No Log Run</u> , 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.