

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
J-283
DATE WELL COMPLETED
4-18-03

PERMIT NUMBER
NAME OF DRILLING FIRM
Pierce Well

NAME & MAILING ADDRESS OF LANDOWNER
Chuck Rouse
Fort Bayou
Vancleave, Ms
Latitude:
Longitude:
WELL LOCATION SEC TOWNSHIP RANGE
24 6 N 8 E
DISTANCE DIRECTION NEAREST TOWN
1/2 Miles **N** of **Humphreys Farm Rd**
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 **1**

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Top soil	0	10
Clay	10	30
Sand	30	40
Clay	40	110
good sand	110	150

WELL DATA

Well Depth **150'** Casing Diameter (In.) **2"** Casing Length (Ft.) **140**
Type of Casing **Plastic** Hole Depth **150** Depth to Static Water Level **20'**
TYPE OF COMPLETION: (Circle One or More):
 Gravel Packed, Underreamed, Telescoped,
 Natural Development, Open Hole, Other
(Describe) _____

WELL GROUTED TO A DEPTH OF **15** FEET
Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

Diameter - Inches **2"** Length - Feet **10** Slot Size - Inches **006**
Screen Type **Plastic** Depth to Bottom - Feet **150'**

Top of Lap Pipe or Reduction in Casing
 FEET IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

RECEIVED

APR 30 2003

BY: OLWR

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.

Michael Pierce 0296
Signature of Licensed Driller and License No.

4-18-03
Date

If well telescopes please sketch and show depths.

GROUND LEVEL

SECTION _____

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
10	2	60 FT.

PUMP TEST

Well yielded 10 GPM with
a drawdown of 10 ft.
after 1 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.