

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 *J 2652* CODED

DATE WELL COMPLETED
10-7-97

PERMIT NUMBER

NAME OF DRILLING FIRM
Coast Water Well Service

NAME & MAILING ADDRESS OF LANDOWNER
Robert Lucas
Stigler Hill Rd.
Ocean Springs, Ms.

WELL LOCATION SEC *24* TOWNSHIP *6 N* RANGE *9 E*

DISTANCE *6* Miles DIRECTION *NW* of NEAREST TOWN *Ocean Springs*

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*

Pump Capacity (GPM) *12* No. of Stages *2* Setting Depth _____ FT.

PUMP TEST

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

WELL DATA

Well Depth *168'* Casing Diameter (In.) *2"* Casing Length (Ft.) *158'*

Type of Casing *PVC* Hole Depth *168'* Depth to Static Water Level *19'*

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): No Log Run,
Electric, Gamma Ray, Density, Sonic, Neutron,
Other (Describe) _____

Name of Organization Running Log _____

SCREEN DATA

Diameter - Inches *2"* Length - Feet *10'* Slot Size - Inches *.004*

Screen Type *PVC Wrapped* Depth to Bottom - Feet *168'*

GEOLOGIC DATA (Office Use Only)

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

Driller's Remarks

Top of Lap Pipe or Reduction in Casing

IF TELESKOPED OR MORE THAN
FEET ON SCREEN USE BACK PAGE

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Top Soil</i>	<i>0</i>	<i>2</i>
<i>Orange Gray Shale</i>	<i>2</i>	<i>30</i>
<i>Fine Med Sand</i>	<i>30</i>	<i>50</i>
<i>Blue Clay</i>	<i>50</i>	<i>145</i>
<i>Fine Med Sand</i>	<i>145</i>	<i>168</i>

RECEIVED

DEC 08 1997

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

24

Please indicate well location X.

ADDITIONAL INFORMATION

RECEIVED

APR 10 1981

Office of Public Health & Environmental Control
Department of Health & Human Resources
Division of Environmental Health

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