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: 8	CODED:
F 2669	PERMIT NUMBER:
DATE WELL COMPLETED: 1-13-98	NAME OF DRILLING FIRM: Coast Water Well Service

NAME & MAILING ADDRESS OF LANDOWNER
Robert Lucas X-7
School land Rd.
Vancleave Ms.

WELL LOCATION	SEC	TOWNSHIP	RANGE
	9	6 N (S)	8 E (W)

DISTANCE	DIRECTION	NEAREST TOWN
6 Miles	West of	Vancleave

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)	No. of Stages	Setting Depth
8.5	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.)
165'	2"	155'

Type of Casing	Hole Depth	Depth to Static Water Level
PVC	165'	35'

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

SCREEN DATA

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

Screen Type	Depth to Bottom - Feet
PVC Wrapped	165'

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

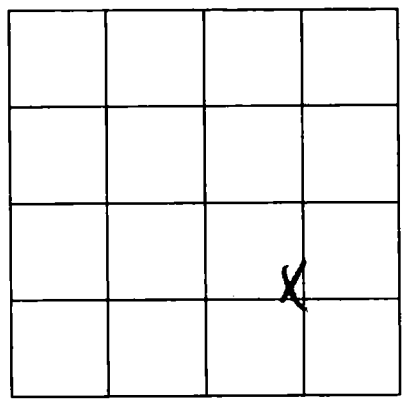
Top of Lap Pipe or Reduction in Casing
FEET

IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
Top Soil	0	2			
Blue Clay	2	60			
Brown Coarse Sand	60	78			
Blue Clay	78	145			
Med gray Sand	145	165			
			03-30-98A09:55 RCVD		
			IF MORE SPACE IS NEEDED, USE BACK		

If well telescopes please sketch and show depths.

GROUND LEVEL



SECTION 9

Please indicate well location X.

ADDITIONAL INFORMATION

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