

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
5285

DATE WELL COMPLETED
5-5-99

PERMIT NUMBER

NAME OF DRILLING FIRM
Coastal Water Well Service

NAME & MAILING ADDRESS OF LANDOWNER
Robert Lucas AK-16
Ridgeland Rd
Vancleave Ms

WELL LOCATION SEC **10** TOWNSHIP **6** RANGE **8**

DISTANCE **5** Miles DIRECTION **West** of NEAREST TOWN **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

Pump Capacity (GPM) 7	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 80'	Casing Diameter (In) 2"	Casing Length (Ft) 70'
Type of Casing PVC	Hole Depth 80'	Depth to Static Water Level 90'

TYPE OF COMPLETION: (Circle One or More):
 Gravel Packed, Underreamed, Telescoped,
 Natural Development, Open Hole, Other

WELL GROUTED TO A DEPTH OF **20** FEET
Type Grout (circle one): Cement, Bentonite, or Mix

LOG DATA

TYPE OF LOG RUN (Circle One):
Electric, Gamma Ray, Density, Sonic, No Log Run, 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 80'	

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
Top Soil	0	2
Brown Clay	2	25
Blue Clay	25	45
White Coarse Sand	45	80

RECEIVED

JUL 09 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 _____

Please indicate well location X.

ADDITIONAL INFORMATION

RECEIVED

JUL 19 1988

Office of Air & Water Resources
Dept. of Environmental Quality

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