

**MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY**

Office of Land and Water Resources

P. O. Box 10631  
Jackson, MS 39289-0631  
**WATER WELL DRILLERS LOG**

COUNTY WHERE LOCATED  
**DACKLER**

WELL NUMBER CODED  
**S-311**

DATE WELL COMPLETED  
**1-24-02**

PERMIT NUMBER

NAME OF DRILLING FIRM  
**Coast Water Well Service**

NAME & MAILING ADDRESS OF LANDOWNER  
**Fred Lemon**

**Armenin Ro**

Latitude:  
Longitude: **Ocean Springs Ms**

WELL LOCATION: SEC **36** TOWNSHIP **6 N** RANGE **9 W**

DISTANCE **5** Miles DIRECTION **N** 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**

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Top Soil	0	2
Orange + white Clay	2	33
White Coarse Sand	33	52
Blue Clay w/str of sand	52	300
Low med to med Sand	300	313
Blue Clay w/str of sand	313	638
Low medium Sand	638	653

**WELL DATA**

Well Depth <b>653'</b>	Casing Diameter (in.) <b>2"</b>	Casing Length (Ft.) <b>643'</b>
Type of Casing <b>DVC</b>	Hole Depth <b>653'</b>	Depth to Static Water Level <b>70'</b>

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

**RECEIVED**

**MAR 15 2002**

Dept. of Environmental Quality  
Office of Land & Water Resources

WELL GROUTED TO A DEPTH OF **10** FEET  
Type Grout (circle one): Cement,  Bentonite, or Mix

**SCREEN DATA**

Diameter - Inches <b>2"</b>	Length - Feet <b>10'</b>	Slot Size - Inches <b>.004</b>
Screen Type <b>PVC</b>	Depth to Bottom - Feet <b>653'</b>	

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 Ridgell 472**  
Signature of Licensed Driller and License No.

**3/8/02**  
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

X			

SECTION 36

Please indicate well location X.

Pump Capacity (GPM) <u>6</u>	No. of Stages <u>2</u>	Setting Depth _____ FT.
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PUMP TEST

Well yielded \_\_\_\_\_ GPM with  
a drawdown of \_\_\_\_\_ ft.  
after \_\_\_\_\_ 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.