

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  
**K-363**

CODED

DATE WELL COMPLETED  
**5-2-03**

PERMIT NUMBER

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

NAME & MAILING ADDRESS OF LANDOWNER  
**Vanclave First Baptist Church**  
**Hwy 57**

Latitude:

Longitude: **Vanclave, Ms**

WELL LOCATION: SEC **16** TOWNSHIP **6<sup>th</sup>** RANGE **7<sup>th</sup> W**

DISTANCE **1<sup>1/2</sup>** Miles DIRECTION **←** NEAREST TOWN **of Vanclave**

OTHER LANDMARK

WELL PURPOSE:  Irrigation,  Municipal,  Industrial,  Fish Pond, etc.  
**WATER SOCCER FIELD**

PUMP DATA

PUMP TYPE (Circle One):  
 Submersible,  Turbine,  ~~Flowing Well~~,  Other (Describe) \_\_\_\_\_

POWER TYPE (Circle One):  
 Electric,  Tractor,  Diesel,  Gasoline,  Butane,  Other (Describe) \_\_\_\_\_ H/P **3**

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<b>Tan Sand</b>	<b>0</b>	<b>1</b>
<b>Orange Clay</b>	<b>1</b>	<b>18</b>
<b>White Coarse Sand</b>	<b>18</b>	<b>30</b>
<b>Blue Clay</b>	<b>30</b>	<b>55</b>
<b>Brown Coarse Sand</b>	<b>55</b>	<b>128</b>

WELL DATA

Well Depth **128'** Casing Diameter (in.) **4"** Casing Length (Ft.) **108'**

Type of Casing **PVC** Hole Depth **128'** Depth to Static Water Level **25'**

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

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

SCREEN DATA

Diameter - Inches **4"** Length - Feet **20'** Slot Size - Inches **.008**

Screen Type **PVC** Depth to Bottom - Feet **128'**

RECEIVED

MAY 19 2003

BY: OLWR

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.

**Joseph Ruffell 472**  
Signature of Licensed Driller and License No.

**5/15/03**  
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

	X		

SECTION 16

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth	
<u>55</u>	<u>9</u>	<u>80</u>	FT.

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

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