

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Office of Land and Water Resources

P. O. Box 10631
Jackson, MS 39289-0631

WATER WELL DRILLERS LOG

COUNTRY WELL LOCATED Jackson	
WELL NUMBER K-387	CODED
DATE WELL COMPLETED 1-22-04	

PERMIT NUMBER
NAME OF DRILLING FIRM Coast Water Well Service

NAME & MAILING ADDRESS OF LANDOWNER Ruby Janner			
Potteraw Bayou Rd			
Latitude:			
Longitude: Vandeventer, MS			
WELL LOCATION	SEC	TOWNSHIP	RANGE
	10	6	7
DISTANCE	DIRECTION	NEAREST TOWN	
1 Miles	ENE	of Vandeventer	
OTHER LANDMARK			
WELL PURPOSE: <input checked="" type="radio"/> Home Irrigation, <input type="radio"/> Municipal, <input type="radio"/> Industrial, <input type="radio"/> Fish Pond, etc.			

PUMP DATA		
PUMP TYPE (Circle One): Submersible, Turbine, <input checked="" type="radio"/> Flowing Well , Other (Describe) _____		
POWER TYPE (Circle One): <input checked="" type="radio"/> Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P 1		
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
TOP SOIL	0	1
White + Blue Clay	1	90
White Coarse Sand	90	120
Blue Clay	120	212
Grey Medium Sand	212	219
Blue Clay	219	283
Grey Coarse Sand	283	315
RECEIVED		
JAN 28 2004		
BY: OLWR		
Top of Lap Pipe or Reduction in Casing		
FEET	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE	

WELL DATA		
Well Depth 315'	Casing Diameter (In.) 2"	Casing Length (Ft.) 305'
Type of Casing PVC	Hole Depth 315'	Depth to Static Water Level 72'
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="radio"/> Gravel Packed, <input type="radio"/> Underreamed, <input type="radio"/> Telescoped, <input checked="" type="radio"/> Natural Development, <input type="radio"/> Open Hole, <input type="radio"/> Other (Describe) _____		
WELL GROUTED TO A DEPTH OF 10 FEET Type Grout (circle one): Cement/ <input checked="" type="radio"/> Bentonite/ or Mix		

SCREEN DATA		
Diameter - Inches 2"	Length - Feet 10'	Slot Size - Inches .006
Screen Type PVC	Depth to Bottom - Feet 315'	

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 R. Janner 472
Signature of Licensed Driller and License No.

1-28-04
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

	X		

SECTION 10

Please indicate well location X.

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