

# MISSISSIPPI DEPARTMENT OF NATURAL RESOURCES

Bureau of Land and Water Resources

COUNTY WELL LOCATED <b>JACKSON</b>
WELL NUMBER CODED <b>R2296</b>
DATE WELL COMPLETED <b>1-24-90</b>

PERMIT NUMBER  
NAME OF DRILLING FIRM <i>Coast Water Well Serv. Inc.</i>

P.O. Box 10631  
Jackson, Mississippi 39209  
**WATER WELL DRILLERS LOG**

NAME & MAILING ADDRESS OF LANDOWNER <i>Robert Williams</i>		
<i>Paige Bayou Rd.</i>		
<i>Vancleave Ms 39564</i>		
WELL LOCATION: SEC	TOWNSHIP	RANGE
<b>15</b>	<b>6<sup>N</sup></b>	<b>7<sup>E</sup></b>
DISTANCE <b>1</b> Miles	DIRECTION <b>EAST</b>	NEAREST TOWN of <b>Vancleave</b>
OTHER LANDMARK		
WELL PURPOSE: <u>Home</u> Irrigation, Municipal, Industrial, Fish Pond, etc.		

PUMP DATA		
PUMP TYPE (Circle One): Submersible, Turbine, <u>Jet</u> Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): <u>Electric</u> , Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P _____		
Pump Capacity (GPM) <b>12</b>	No. of Stages <b>2</b>	Setting Depth _____ FT.
PUMP TEST  Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

WELL DATA		
Well Depth <b>100'</b>	Casing Diameter (In.) <b>2"</b>	Casing Length (Ft.) <b>90'</b>
Type of Casing <b>PVC</b>	Hole Depth <b>100'</b>	Depth to Static Water Level <b>17'</b>
TYPE OF COMPLETION: (Circle One or More): <u>Natural Development</u> , Gravel Packed, Underreamed, Telescoped, Open Hole, Other (Describe) _____		
Top of Lap Pipe or Reduction in Casing  <b>FEET</b> IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE		

LOG DATA	
TYPE OF LOG RUN (Circle One): <u>No Log Run</u> , Electric, Gamma Ray, Density, Sonic, Neutron, Other (Describe) _____	
Name of Organization Running Log _____	

SCREEN DATA		
Diameter - Inches <b>2"</b>	Length - Feet <b>10'</b>	Slot Size - Inches <b>.008</b>
Screen Type <b>PVC</b>	Depth to Bottom - Feet <b>100'</b>	

GEOLOGIC DATA (Office Use Only)			
Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test
Driller's Remarks <div style="text-align: center; font-size: 2em; font-weight: bold; opacity: 0.5;">RECEIVED</div>			
<b>MAR 30 1990</b>			
<b>Department of Natural Resources</b> <b>Bureau of Land &amp; Water Resources</b>			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
<i>Top soil</i>		<i>1</i>			
<i>Yellow coarse sand</i>		<i>1</i>			
<i>clay</i>		<i>25</i>			
<i>white clay</i>	<i>25</i>	<i>38</i>			
<i>blue clay</i>	<i>38</i>	<i>40</i>			
<i>Brown coarse sand</i>	<i>40</i>	<i>100</i>			
IF MORE SPACE IS NEEDED, USE BACK					

If well telescopes please sketch and show depths.

GROUND LEVEL

		X	

SECTION 15

Please indicate well location X.

ADDITIONAL INFORMATION

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