

**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 <i>Jackson</i>
WELL NUMBER (CODED) <i>R 2314</i>
DATE WELL COMPLETED <i>4-8-93</i>

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Const Water Well Dr. Inc.</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Paul Allen</i>		
<i>14309 Goff St.</i>		
<i>Biloxi, Ms. 39532-8952</i>		
WELL LOCATION: SEC	TOWNSHIP	RANGE
<i>7</i>	<i>6</i>	<i>7</i>
DISTANCE	DIRECTION	NEAREST TOWN
<i>2</i> Miles	<i>West</i>	<i>VanLeang</i>
OTHER LANDMARK		
WELL PURPOSE: <input checked="" type="radio"/> Home, <input type="radio"/> Irrigation, <input type="radio"/> Municipal, <input type="radio"/> Industrial, <input type="radio"/> Fish Pond, etc.		

<b>PUMP DATA</b>		
PUMP TYPE (Circle One): Submersible, Turbine, <input checked="" type="radio"/> Jet, <input type="radio"/> Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): <input checked="" type="radio"/> Electric, <input type="radio"/> Tractor, <input type="radio"/> Diesel, <input type="radio"/> Gasoline, <input type="radio"/> Butane, Other (Describe) _____ H/P <i>2</i>		
Pump Capacity (GPM) <i>10</i>	No. of Stages <i>3</i>	Setting Depth _____ FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

<b>WELL DATA</b>		
Well Depth <i>387'</i>	Casing Diameter (In.) <i>2"</i>	Casing Length (Ft.) <i>374'</i>
Type of Casing <i>PVC</i>	Hole Depth <i>387'</i>	Depth to Static Water Level <i>82'</i>
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 <i>20</i> FEET Type Grout (circle one): <input checked="" type="radio"/> Cement, <input checked="" type="radio"/> Bentonite, or Mix		

<b>LOG DATA</b>	
TYPE OF LOG RUN (Circle One): Electric, Gamma Ray, Density, Sonic, <input checked="" type="radio"/> No Log Run, Neutron, Other (Describe) _____	
Name of Organization Running Log	

<b>SCREEN DATA</b>		
Diameter - Inches <i>2"</i>	Length - Feet <i>10'</i>	Slot Size - Inches <i>.008</i>
Screen Type <i>PVC</i>		Depth to Bottom - Feet <i>384'</i>

<b>GEOLOGIC DATA (Office Use Only)</b>			
Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test
Driller's Remarks			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Top soil</i>	<i>0</i>	<i>2</i>
<i>Red clay</i>	<i>2</i>	<i>12</i>
<i>Coarse sand</i>	<i>12</i>	<i>20</i>
<i>Blue Clay &amp; sand</i>	<i>20</i>	<i>90</i>
<i>Coarse sand</i>	<i>90</i>	<i>130</i>
<i>Blue Clay &amp; sand</i>	<i>130</i>	<i>280</i>
<i>Coarse sand &amp; silt</i>	<i>280</i>	<i>301</i>
<i>Med sand &amp; silt clay</i>	<i>301</i>	<i>360</i>
<i>Med. sand</i>	<i>360</i>	<i>387</i>

FORMATIONS (Continued)	FROM	TO
<i>Blue Clay &amp; sand</i>	<i>90</i>	<i>130</i>
<i>Coarse sand</i>	<i>130</i>	<i>280</i>
<i>Med sand &amp; silt clay</i>	<i>280</i>	<i>301</i>
<i>Med. sand</i>	<i>301</i>	<i>360</i>
<i>Med. sand</i>	<i>360</i>	<i>387</i>

JUL 20 1993

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 7

Please indicate well location X.

ADDITIONAL INFORMATION

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