

**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<br><b>Jackson</b> |       |
| WELL NUMBER<br><b>R-2765</b>          | CODED |
| DATE WELL COMPLETED<br><b>7-5-01</b>  |       |

|  |
|--|
| PERMIT NUMBER  |
| NAME OF DRILLING FIRM<br><b>Coast Water Well Service</b> |

|  |           |                     |          |
|--|-----------|---------------------|----------|
| NAME & MAILING ADDRESS OF LANDOWNER<br><b>Clinton Colburn</b>  |           |                     |          |
| <b>Old River Rd.</b>   |           |                     |          |
| <b>Vancleave, Ms. 39565</b>  |           |                     |          |
| WELL LOCATION  | SEC       | TOWNSHIP            | RANGE    |
|  | <b>2</b>  | <b>6</b>            | <b>7</b> |
| DISTANCE   | DIRECTION | NEAREST TOWN        |          |
| <b>2 1/2</b> Miles   | <b>NE</b> | of <b>Vancleave</b> |          |
| OTHER LANDMARK   |           |                     |          |
| WELL PURPOSE: <input checked="" type="checkbox"/> Home Irrigation, <input type="checkbox"/> Municipal, <input type="checkbox"/> Industrial, <input type="checkbox"/> Fish Pond, etc. |           |                     |          |

|  |                            |                                 |
|--|----------------------------|---------------------------------|
| <b>PUMP DATA</b>   |                            |                                 |
| PUMP TYPE (Circle One):<br><input checked="" type="radio"/> Submersible, <input type="radio"/> Turbine, <input type="radio"/> Jet, <input type="radio"/> Flowing Well,<br>Other (Describe) _____   |                            |                                 |
| POWER TYPE (Circle One):<br><input checked="" type="radio"/> Electric, <input type="radio"/> Tractor, <input type="radio"/> Diesel, <input type="radio"/> Gasoline, <input type="radio"/> Butane,<br>Other (Describe) _____ H/P <b>1</b> |                            |                                 |
| Pump Capacity (GPM)<br><b>10</b>   | No. of Stages<br><b>10</b> | Setting Depth<br><b>180'</b> FT |
| PUMP TEST  |                            |                                 |
| Well yielded _____ GPM with<br>a drawdown of _____ ft.<br>after _____ hours of pumping   |                            |                                 |

|   |                                    |   |
|---|------------------------------------|---|
| <b>WELL DATA</b>  |                                    |   |
| Well Depth<br><b>233'</b>   | Casing Diameter (In.)<br><b>2"</b> | Casing Length (Ft.)<br><b>223'</b>        |
| Type of Casing<br><b>PVC</b>  | Hole Depth<br><b>233'</b>          | Depth to Static Water Level<br><b>98'</b> |
| TYPE OF COMPLETION: (Circle One or More):<br><input checked="" type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped,<br><input checked="" type="checkbox"/> Natural Development, <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other<br>(Describe) _____ |                                    |   |
| WELL GROUTED TO A DEPTH OF <b>10</b> FEET<br>Type Grout (circle one): Cement, <input checked="" type="radio"/> Bentonite or Mix   |                                    |   |

|   |  |
|---|--|
| <b>LOG DATA</b>   |  |
| TYPE OF LOG RUN (Circle One):<br>Electric, Gamma Ray, Density, Sonic, <input checked="" type="radio"/> Neutron,<br>Other (Describe) _____ |  |
| Name of Organization Running Log  |  |

|                                |                                       |                                   |  |
|--------------------------------|---------------------------------------|-----------------------------------|--|
| <b>SCREEN DATA</b>             |                                       |                                   |  |
| Diameter - Inches<br><b>2"</b> | Length - Feet<br><b>10'</b>           | Slot Size - Inches<br><b>.008</b> |  |
| Screen Type<br><b>PVC</b>      | Depth to Bottom - Feet<br><b>233'</b> |                                   |  |

|  |               |  |              |
|--|---------------|--|--------------|
| <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                      |               |  |              |
| Top of Lap Pipe or Reduction in Casing |               |  |              |
| FEET                                   |               | IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE |              |

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM       | TO         |
|---------------------------------------|------------|------------|
| <b>Orange + White Clay</b>            | <b>0</b>   | <b>19</b>  |
| <b>White Coarse Sand</b>              | <b>19</b>  | <b>52</b>  |
| <b>White Clay w/ streaks of Sand</b>  | <b>52</b>  | <b>104</b> |
| <b>White Coarse Sand</b>              | <b>104</b> | <b>130</b> |
| <b>Blue Clay streaks of Sand</b>      | <b>130</b> | <b>180</b> |
| <b>Gray Medium to Coarse Sand</b>     | <b>180</b> | <b>185</b> |
| <b>Blue Clay</b>                      | <b>185</b> | <b>221</b> |
| <b>Gray Medium to Coarse Sand</b>     | <b>221</b> | <b>233</b> |
|                                       |            |            |
|                                       |            |            |
|                                       |            |            |

| FORMATIONS (Continued)            | FROM | TO |
|-----------------------------------|------|----|
|                                   |      |    |
| <b>REC'D OCT 22 2001</b>          |      |    |
|                                   |      |    |
|                                   |      |    |
|                                   |      |    |
| IF MORE SPACE IS NEEDED, USE BACK |      |    |

If well telescopes please sketch and show depths.

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GROUND LEVEL

|  |   |  |  |
|--|---|--|--|
|  |   |  |  |
|  |   |  |  |
|  | X |  |  |
|  |   |  |  |

SECTION 2

Please indicate well location X.

ADDITIONAL INFORMATION

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