

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 <u>Jackson</u>	
WELL NUMBER <u>W-241</u>	CODED
DATE WELL COMPLETED <u>6-11-02</u>	

PERMIT NUMBER
NAME OF DRILLING FIRM <u>Pierce Well</u>

NAME & MAILING ADDRESS OF LANDOWNER <u>Gay Smith</u> <u>Vandœuvre, Ms</u>			
Latitude:			
Longitude:			
WELL LOCATION	SEC	TOWNSHIP	RANGE
	<u>26</u>	<u>6</u>	<u>N 6 E</u>
DISTANCE	DIRECTION	NEAREST TOWN	
<u>1</u> Miles	<u>S</u>	of <u>Hwy 614</u>	
OTHER LANDMARK			
WELL PURPOSE: <input checked="" type="checkbox"/> Home Irrigation, <input type="checkbox"/> Municipal, <input type="checkbox"/> Industrial, <input type="checkbox"/> Fish Pond, etc.			

PUMP DATA	
PUMP TYPE (Circle One): Submersible, Turbine, <input checked="" type="radio"/> Jet, Other (Describe) _____	Flowing Well, _____
POWER TYPE (Circle One): <input checked="" type="radio"/> Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) _____	H/P <u>1</u>

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>Top soil</u>	<u>0</u>	<u>10</u>
<u>Clay</u>	<u>10</u>	<u>25</u>
<u>good sand</u>	<u>25</u>	<u>53</u>

WELL DATA

Well Depth <u>53'</u>	Casing Diameter (In.) <u>2"</u>	Casing Length (Ft.) <u>48</u>
Type of Casing <u>plastic</u>	Hole Depth <u>53'</u>	Depth to Static Water Level <u>35'</u>
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped, <input checked="" type="checkbox"/> Natural Development, <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other (Describe) _____		

WELL GROUTED TO A DEPTH OF 15 FEET
Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

Diameter - Inches <u>2"</u>	Length - Feet <u>5'</u>	Slot Size - Inches <u>006</u>
Screen Type <u>Plastic</u>	Depth to Bottom - Feet <u>53'</u>	

RECEIVED

JUN 25 2002

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Top of Lap Pipe or Reduction in Casing
0 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.

Michael Pierce 0-296
Signature of Licensed Driller and License No.

06-11-02
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

SECTION _____

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
10	2	40 FT.

PUMP TEST
 Well yielded _____ 10 _____ GPM with
 a drawdown of _____ 10 _____ ft.
 after _____ 1 _____ 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

RECORDED

Aug 3 1951

Water Resources Division
 U.S. Geological Survey

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