

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 Cockson	
WELL NUMBER M-2462	CODED
DATE WELL COMPLETED 1-17-02	

PERMIT NUMBER
NAME OF DRILLING FIRM Coast Water Well Service

NAME & MAILING ADDRESS OF LANDOWNER John Bower Pioneer Trail			
Latitude: Moss Point Ms 39562			
Longitude: Moss Point			
WELL LOCATION	SEC	TOWNSHIP	RANGE
	29	6	5
DISTANCE	DIRECTION	NEAREST TOWN	
6 Miles	NE	of Moss Point	
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.			

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

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
TOP SOIL	0	3
Gray Clay	3	22
White Coarse Sand	22	34
Blue Clay w/ Str. of Sand	34	189
Gray Medium Sand	189	208

WELL DATA

Well Depth 208'	Casing Diameter (In.) 2"	Casing Length (Ft.) 198'
Type of Casing PVC	Hole Depth 208'	Depth to Static Water Level 10'
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 **10** FEET
Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

Diameter - Inches 2"	Length - Feet 10'	Slot Size - Inches .004
Screen Type PVC	Depth to Bottom - Feet 208'	

RECEIVED

MAR 15 2002

Dept. of Environmental Quality
Office of Land & Water Resources

Top of Lap Pipe or Reduction in Casing

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.

Jack Pittsford 472
Signature of Licensed Driller and License No.

3/8/02
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

			X

SECTION 29

Please indicate well location X.

Pump Capacity (GPM) <u>9</u>	No. of Stages <u>2</u>	Setting Depth _____ FT.
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.