

**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 LOCATION
JACKSON

WELL NUMBER: *N-762* CODED

DATE WELL COMPLETED: *11-20-02*

PERMIT NUMBER

NAME OF DRILLING FIRM: *Construct Water Well Service*

NAME & MAILING ADDRESS OF LANDOWNER
Tim Dutton
Harvest Dr.

Latitude:
Longitude: *Ocean Springs, Ms.*

WELL LOCATION: SEC *3* TOWNSHIP *7 S* RANGE *9 W*

DISTANCE *4* Miles DIRECTION *NW* of NEAREST TOWN *Ocean Springs*

OTHER LANDMARK

WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. Home

PUMP DATA

PUMP TYPE (Circle One):
Submersible, Turbine, Jet, Flowing Well,
Other (Describe) _____

POWER TYPE (Circle One):
 Electric, Tractor, Diesel, Gasoline, Butane,
Other (Describe) _____ H/P *1*

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Top Soil</i>	<i>0</i>	<i>2</i>
<i>Orange Clay</i>	<i>2</i>	<i>16</i>
<i>White Coarsel Sand</i>	<i>16</i>	<i>30</i>
<i>Blue Clay</i>	<i>30</i>	<i>30</i>
<i>Gray Medium Sand</i>	<i>30</i>	<i>35</i>

RECEIVED
DEC 02 2002
BY: OLWR

WELL DATA

Well Depth: *250'* Casing Diameter (In.): *2"* Casing Length (Ft.): *240'*

Type of Casing: *PVC* Hole Depth: *250'* Depth to Static Water Level: *35'*

TYPE OF COMPLETION: (Circle One or More):
 Gravel Packed, Underreamed, Telescoped,
 Natural Development, Open Hole, Other
(Describe) _____

WELL GROUTED TO A DEPTH OF *60* FEET
Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

Diameter - Inches: *2"* Length - Feet: *10'* Slot Size - Inches: *.006*

Screen Type: *PVC* Depth to Bottom, Feet: *250'*

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.

John Pittell 472
Signature of Licensed Driller and License No. *11/25/02*
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

			X

SECTION 3

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
8.5	2	← FT.

PUMP TEST

Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping

LOG DATA

TYPE OF LOG RUN (Circle One):
 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.