

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 JACKSON	
WELL NUMBER N-760	CODED
DATE WELL COMPLETED 9-17-02	

PERMIT NUMBER
NAME OF DRILLING FIRM Coast Water Well Service

NAME & MAILING ADDRESS OF LANDOWNER Harold Homes			
2609 N. 8th ST.			
Latitude:			
Longitude: Ocean Springs, MS			
WELL LOCATION	SEC	TOWNSHIP	RANGE
	35	7th	8th
DISTANCE	DIRECTION	NEAREST TOWN	
3/4 Miles	EAST	of Ocean Springs	
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, <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 1		

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Top Soil	0	3
Orange Clay	3	15
White Coarse Sand	15	30
Blue Clay	30	164
Low Medium Sand	164	173
Blue Clay w/str. of sand	173	173
Gray Coarse Sand	43	45

WELL DATA		
Well Depth 452'	Casing Diameter (In.) 2"	Casing Length (Ft.) 442'
Type of Casing PVC	Hole Depth 452'	Depth to Static Water Level 90'
TYPE OF COMPLETION: (Circle One or More): 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, <input checked="" type="checkbox"/> Bentonite, or Mix		

SCREEN DATA		
Diameter - Inches 2"	Length - Feet 10'	Slot Size - Inches .008
Screen Type PVC	Depth to Bottom - Feet 452'	

RECEIVED	
NOV 08 2002	
BY: OLWH	
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 Reddell 472
Signature of Licensed Driller and License No.

11-5-02
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

		X	

SECTION 35

Please indicate well location X.

Pump Capacity (GPM) <u>6</u>	No. of Stages <u>2</u>	Setting Depth <u> </u> FT.
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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, Neutrons,
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.