

**MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY**  
Bureau of Land and Water Resources

P. O. Box 10631  
Jackson, MS 39289-0631  
**WATER WELL DRILLERS LOG**

COUNTY WELL LOCATED <i>Jackson</i>
WELL NUMBER UNCODED <i>N2381</i>
DATE WELL COMPLETED <i>1-26-91</i>

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Coast Water Well Dr. Inc.</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Jackson County School Dist. Walker Rd. Ocean Springs, Ms</i>			
WELL LOCATION:	SEC <i>7</i>	TOWNSHIP <i>7<sup>th</sup></i>	RANGE <i>8<sup>th</sup> W</i>
DISTANCE <i>2</i> Miles	DIRECTION <i>N</i>	NEAREST TOWN <i>Ocean</i>	
OTHER LANDMARK <i>SPRINGS</i>			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. <i>School temp. well</i>			

<b>PUMP DATA</b>		
PUMP TYPE (Circle One): <input checked="" type="radio"/> Submersible, <input type="radio"/> Turbine, <input type="radio"/> Jet, <input type="radio"/> Flowing Well, <input type="radio"/> 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, <input type="radio"/> Other (Describe) _____ H/P <i>1</i>		
Pump Capacity (GPM) <i>25</i>	No. of Stages <i>7</i>	Setting Depth _____ FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

<b>WELL DATA</b>		
Well Depth <i>100'</i>	Casing Diameter (In.) <i>2"</i>	Casing Length (Ft.) <i>80'</i>
Type of Casing <i>PVC</i>	Hole Depth <i>107'</i>	Depth to Static Water Level <i>31'</i>
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="radio"/> Gravel Packed, <input type="radio"/> Underreamed, <input type="radio"/> Telescoped, <input checked="" type="radio"/> Natural Development, <input type="radio"/> Open Hole, <input type="radio"/> Other _____ (Describe) _____		
Top of Lap Pipe or Reduction in Casing _____ FEET IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE		

<b>LOG DATA</b>	
TYPE OF LOG RUN (Circle One): <input checked="" type="radio"/> No Log Run, <input type="radio"/> Electric, <input type="radio"/> Gamma Ray, <input type="radio"/> Density, <input type="radio"/> Sonic, <input type="radio"/> Neutron, <input type="radio"/> Other (Describe) _____	
Name of Organization Running Log	

<b>SCREEN DATA</b>		
Diameter - Inches <i>2'</i>	Length - Feet <i>20'</i>	Slot Size - Inches <i>1008</i>
Screen Type <i>PVC</i>	Depth to Bottom - Feet <i>100'</i>	

<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

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Top soil</i>	<i>0</i>	<i>1</i>
<i>yellow clay</i>	<i>1</i>	<i>6</i>
<i>yellow sand/gravel</i>	<i>6</i>	<i>13</i>
<i>thick clay</i>	<i>13</i>	<i>19</i>
<i>blue clay</i>	<i>19</i>	<i>58</i>
<i>brown coarse sand</i>	<i>58</i>	<i>75</i>
<i>thick clay</i>	<i>75</i>	<i>78</i>
<i>brown coarse sand</i>	<i>78</i>	<i>104</i>
<i>blue clay</i>	<i>104</i>	<i>107</i>

FORMATIONS (Continued)	FROM	TO
<b>RECEIVED</b>		
MAY 20 1991		
Dept. of Environmental Quality Bureau of Land & Water Resources		
IF MORE SPACE IS NEEDED, USE BACK		

If well telescopes please  
sketch and show depths.

GROUND LEVEL

	X		

SECTION 7

Please indicate well location X.

ADDITIONAL INFORMATION

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