

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 2501

CODED

PERMIT NUMBER

NAME OF DRILLING FIRM
Coast Water Well Service

DATE WELL COMPLETED
7-23-97

NAME & MAILING ADDRESS OF LANDOWNER
DVW Homes

Clanshell Rd.

Ocean Springs, Ms

WELL LOCATION *Sec 11* TOWNSHIP *8 N* RANGE *8 E*

DISTANCE *4* Miles *SE* of *Ocean Springs*

OTHER LANDMARK

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

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*

Pump Capacity (GPM) *9* No. of Stages *2* Setting Depth _____ FT.

PUMP TEST

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

WELL DATA

| | | |
|------------------------------|------------------------------------|---|
| Well Depth <i>202</i> | Casing Diameter (In.) <i>2"</i> | Casing Length (Ft.) <i>192'</i> |
| Type of Casing <i>PVC</i> | Hole Depth <i>202</i> | Depth to Static Water Level <i>25'</i> |

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

WELL GROUTED TO A DEPTH OF *20* FEET
Type Grout (circle one): Cement, Bentonite or Mix

LOG DATA

TYPE OF LOG RUN (Circle One):
Electric, Gamma Ray, Density, Sonic, No Log Run, Neutron, Other (Describe) _____

Name of Organization Running Log

SCREEN DATA

| | | |
|--------------------------------|---------------------------------------|-----------------------------------|
| Diameter - Inches <i>2"</i> | Length - Feet <i>10'</i> | Slot Size - Inches <i>.008</i> |
| Screen Type <i>PVC</i> | Depth to Bottom - Feet <i>202'</i> | |

GEOLOGIC DATA (Office Use Only)

| | | | |
|---------------|---------------|----------------|--------------|
| Surface Elev. | Geologic Unit | Unit Thickness | Depth to Top |
| Subs SWL | Date | Analysis | Aquifer Test |

Driller's Remarks

Top of Lap Pipe or Reduction in Casing _____ FEET

IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM | TO | FORMATIONS (Continued) | FROM | TO |
|---------------------------------------|------------|------------|------------------------|------|----|
| <i>Top Soil</i> | <i>0</i> | <i>2</i> | | | |
| <i>White Coarse sand</i> | <i>2</i> | <i>18</i> | | | |
| <i>Brown Clay</i> | <i>18</i> | <i>30</i> | | | |
| <i>White Coarse sand</i> | <i>30</i> | <i>83</i> | | | |
| <i>Blue Clay</i> | <i>83</i> | <i>143</i> | | | |
| <i>Grey Coarse sand</i> | <i>143</i> | <i>190</i> | | | |
| <i>Blue Clay</i> | <i>190</i> | <i>191</i> | | | |
| <i>Gray Coarse sand</i> | <i>191</i> | <i>202</i> | | | |
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AUG 27 1997

Dept. of Environmental Quality
Office of Land & Water Resources

IF MORE SPACE IS NEEDED, USE BACK

