

**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 <b>Jackson</b>	
WELL NUMBER <b>N 2584</b>	CODED
DATE WELL COMPLETED <b>8-24-98</b>	

PERMIT NUMBER
NAME OF DRILLING FIRM <b>Pierce Well</b>

NAME & MAILING ADDRESS OF LANDOWNER <b>Johnny Naremore</b>			
WELL LOCATION <b>Oceans Springs, MS</b>			
SEC	TOWNSHIP	RANGE	
<b>35</b>	<b>7</b>	<b>S</b>	<b>8</b>
DISTANCE		DIRECTION	
<b>2</b>	<b>S</b>	<b>W</b>	<b>E</b>
Miles		of	
		<b>Hwy 90</b>	
OTHER LANDMARK			
WELL PURPOSE: <input checked="" type="checkbox"/> Home Irrigation, <input type="checkbox"/> Municipal, <input type="checkbox"/> Industrial, <input type="checkbox"/> Fish Pond, etc.			

<b>PUMP DATA</b>		
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 _____		
Pump Capacity (GPM)	No. of Stages	Setting Depth
<b>10</b>	<b>2</b>	<b>40</b> FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

<b>WELL DATA</b>		
Well Depth <b>170'</b>	Casing Diameter (In.) <b>2"</b>	Casing Length (Ft.) <b>160'</b>
Type of Casing <b>Plastic</b>	Hole Depth <b>170'</b>	Depth to Static Water Level <b>30'</b>

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) _____		
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WELL GROUTED TO A DEPTH OF <b>15</b> FEET Type Grout (circle one): Cement, Bentonite, or <input checked="" type="checkbox"/> Mix
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<b>SCREEN DATA</b>		
Diameter - Inches <b>2"</b>	Length - Feet <b>10</b>	Slot Size - Inches <b>006</b>
Screen Type <b>Plastic</b>		Depth to Bottom - Feet <b>170</b>

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

<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
Top of Lap Pipe or Reduction in Casing
<b>FEET</b>
IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Top Soil	0	10
clay	10	40
Sand	40	110
clay	110	150
good sand	150	170

FORMATIONS (Continued)	FROM	TO
<b>RECEIVED</b>		
NOV 25 1998		
Dept. of Environmental Quality Office of Land & Water Resources		
IF MORE SPACE IS NEEDED, USE BACK		

If well telescopes please  
sketch and show depths.

GROUND LEVEL


SECTION \_\_\_\_\_

Please indicate well location X.

ADDITIONAL INFORMATION

RECEIVED

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