

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 <u>W-2677</u>	CODED
DATE WELL COMPLETED <u>9-27-01</u>	

PERMIT NUMBER

NAME OF DRILLING FIRM
East Water Well Service

NAME & MAILING ADDRESS OF LANDOWNER
Jeff Goeliner
Joe Fountain Rd

Latitude:
Longitude: Ocean Springs, Ms.

WELL LOCATION: SEC 1 TOWNSHIP 8 RANGE 8

DISTANCE 4 Miles SE of Spring NEAREST TOWN 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 3

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Top Soil	0	2
White Coarse Sand	2	70
Gray Clay	70	91
Medium Sand	91	114
Blue Clay w/str. of Sand	114	450
Gray medium Sand	450	485

WELL DATA

Well Depth 485' Casing Diameter (In.) 2" Casing Length (Ft.) 470'

Type of Casing PVC Hole Depth 485' Depth to Static Water Level 80'

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

WELL GROUTED TO A DEPTH OF 10 FEET
Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

Diameter - inches <u>2"</u>	Length - Feet <u>15'</u>	Slot Size - inches <u>.004</u>
Screen Type <u>PVC</u>	Depth to Bottom Feet <u>485'</u>	

REC'D JAN 07 2002

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.

Jack Rydell 472
Signature of Licensed Driller and License No. 11/12/01
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

		X	

SECTION 1

Please indicate well location X.

Pump Capacity (GPM) <u>8.5</u>	No. of Stages <u>3</u>	Setting Depth _____ 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, 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.