

**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-2689 CODED

DATE WELL COMPLETED  
1-9-02

PERMIT NUMBER

NAME OF DRILLING FIRM  
Coast Water Well Service

NAME & MAILING ADDRESS OF LANDOWNER  
Lewis Bouchard  
NORTH 4th St.  
Ocean Springs, Ms.

Latitude:  
Longitude:

WELL LOCATION. SEC 35 TOWNSHIP 7<sup>N</sup> RANGE 8<sup>W</sup>

DISTANCE 2 MILES DIRECTION EAST 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 \_\_\_\_\_

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>TOPSOIL</u>	<u>0</u>	<u>2</u>
<u>Orange + Gray Clay</u>	<u>2</u>	<u>31</u>
<u>White Coarse Sand</u>	<u>31</u>	<u>42</u>
<u>Blue Clay</u>	<u>42</u>	<u>125</u>
<u>Gray Medium Sand</u>	<u>125</u>	<u>160</u>

**WELL DATA**

Well Depth 160' Casing Diameter (In.) 2" Casing Length (Ft.) 150'

Type of Casing PVC Hole Depth 160' Depth to Static Water Level 20'

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 2" Length - Feet 10' Slot Size - Inches .004

Screen Type PVC Depth to Bottom, Feet 160'

**RECEIVED**

MAR 15 2002

Dept. of Environmental Quality  
Office of Land & Water Resources

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 Riddell 472  
Signature of Licensed Driller and License No.

3/8/02  
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

1	2	3	4
5	6	7	8
9	10	11	12
13	14	15	16

SECTION 35

Please indicate well location X.

Pump Capacity (GPM) <u>70</u>	No. of Stages <u>2</u>	Setting Depth <u>11</u> FT.
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.