

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 CODED
W-433

DATE WELL COMPLETED
8-27-02

PERMIT NUMBER

NAME OF DRILLING FIRM
Coast Water Well Service

NAME & MAILING ADDRESS OF LANDOWNER
**John Hendley
Bellefontaine Beach**

Latitude:
Longitude: **Ocean Springs, MS**

WELL LOCATION SEC TOWNSHIP RANGE
19 8 S 7 E

DISTANCE DIRECTION NEAREST TOWN
Miles of **Ocean Springs**

OTHER LANDMARK

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

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
Top Soil	0	2
White coarse sand	2	120
Blue clay w/str. of sand	120	315
Gray coarse sand	315	330

RECEIVED

NOV 08 2002

BY: OLWR

Top of Lap Pipe or Reduction in Casing

FEET IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

WELL DATA

Well Depth **330'** Casing Diameter (in.) **2"** Casing Length (Ft.) **330'**

Type of Casing **PVC** Hole Depth **330'** Depth to Static Water Level **30'**

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 **.008**

Screen Type **PVC** Depth to Bottom - Feet **330'**

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 Ridgell 472 Signature of Licensed Driller and License No. **10-8-02** Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

		X	

SECTION 19

Please indicate well location X.

Pump Capacity (GPM) <u>8</u>	No. of Stages <u>2</u>	Setting Depth <u> </u> 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.