

**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  
**0-453**

CODED

PERMIT NUMBER

DATE WELL COMPLETED  
**7-1-03**

NAME OF DRILLING FIRM  
**Coast Water Well Service**

NAME & MAILING ADDRESS OF LANDOWNER  
**Barry Dutz  
Dorothy St.**

Latitude:  
Longitude: **Ocean Springs, Ms**

WELL LOCATION: SEC **8** TOWNSHIP **8** RANGE **7**

DISTANCE **5 1/2** Miles DIRECTION **SE** of NEAREST TOWN **Ocean Springs**

OTHER LANDMARK

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

**PUMP DATA**

PUMP TYPE (Circle One):  
Submersible, Turbine,  **Flowing Well**,  
Other (Describe) \_\_\_\_\_

POWER TYPE (Circle One):  
 Electric, Tractor, Diesel, Gasoline, Butane,  
Other (Describe) \_\_\_\_\_ H/P **1**

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
White coarse sand	0	60
Blue clay	60	72
White coarse sand	72	84
Blue clay	84	110
White coarse sand	110	115
Blue clay	115	340
Gravel to coarse sand	340	347
Blue clay	347	350
Grey coarse sand	350	364

**WELL DATA**

Well Depth <b>364'</b>	Casing Diameter (In.) <b>2"</b>	Casing Length (Ft.) <b>354'</b>
Type of Casing <b>PVC</b>	Hole Depth <b>364'</b>	Depth to Static Water Level <b>35'</b>

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 <b>2"</b>	Length - Feet <b>10'</b>	Slot Size - Inches <b>.006</b>
Screen Type <b>PVC</b>	Depth to Bottom - Feet <b>364'</b>	

**RECEIVED**

**JUL 16 2003**

**BY: OLWR**

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 Reddell 472**  
Signature of Licensed Driller and License No.

**7/14/03**  
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

		X	

SECTION 8

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
8	2	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

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