

**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 0-477 CODED

DATE WELL COMPLETED  
2-13-04

PERMIT NUMBER

NAME OF DRILLING FIRM  
Coast Water Well Service

NAME & MAILING ADDRESS OF LANDOWNER  
Tim + Gene Clardy  
North + Oak ST

Latitude:  
Longitude: Ocean Springs, MS

WELL LOCATION: SEC 8 TOWNSHIP 8 RANGE 7

DISTANCE 4 1/2 MILES DIRECTION SE 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
Top Soil	0	1
White Coarse Sand	1	10
Grey Clay	10	12
White Coarse Sand	12	58
Blue clay	58	135
Grey Medium Sand	135	150

**WELL DATA**

Well Depth <u>150'</u>	Casing Diameter (In.) <u>2"</u>	Casing Length (Ft.) <u>140'</u>
Type of Casing <u>PVC</u>	Hole Depth <u>150'</u>	Depth to Static Water Level <u>10'</u>

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>10'</u>	Slot Size - Inches <u>.004</u>
Screen Type <u>PVC</u>	Depth to Bottom - Feet <u>150'</u>	

**RECEIVED**

FEB 18 2004

**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.

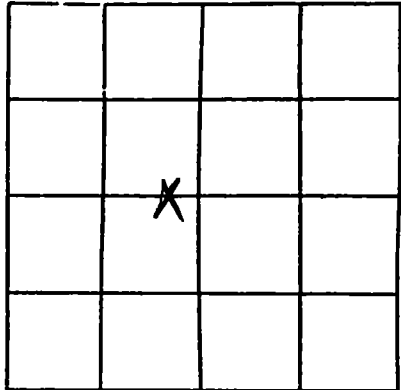
Jack Reddell 472  
Signature of Licensed Driller and License No.

2/17/04  
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL



SECTION 8

Please indicate well location X.

Pump Capacity (GPM) <u>9</u>	No. of Stages <u>2</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): N5 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

Writer's Remarks  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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