**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 | 2401 |
| CODED | |
| PERMIT NUMBER | |
| NAME OF DRILLING FIRM | Coast Water Well Ser Inc |
| DATE WELL COMPLETED | 7-1-93 |

**NAME & MAILING ADDRESS OF LANDOWNER**
Bob Wilson
Oldfield Drive
Gautier Ms. 39553

| WELL LOCATION. | SEC | TOWNSHIP | RANGE |
|---|---|---|---|
| | 12 | 8 N (S) | 7 E (W) |

| DISTANCE | DIRECTION | NEAREST TOWN |
|---|---|---|
| 1N Miles | — of | GAUTIER |

OTHER LANDMARK

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

## 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 1

| Pump Capacity (GPM) | No. of Stages | Setting Depth |
|---|---|---|
| 16 | 2 | FT. |

PUMP TEST

Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping

## WELL DATA

| Well Depth | Casing Diameter (In.) | Casing Length (Ft.) |
|---|---|---|
| 70' | 2" | 60' |

| Type of Casing | Hole Depth | Depth to Static Water Level |
|---|---|---|
| PVC | 70' | 8' |

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

**WELL GROUTED TO A DEPTH OF 20 FEET**
**Type Grout (circle one): Cement, Bentonite, or Mix**

## 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

## SCREEN DATA

| Diameter - Inches | Length - Feet | Slot Size - Inches |
|---|---|---|
| 2" | 10' | 008 |

| Screen Type | Depth to Bottom - Feet |
|---|---|
| PVC | 70' |

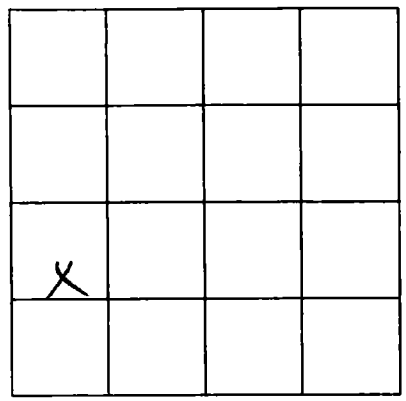
| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM | TO |
|---|---|---|
| top soil | 0 | 2 |
| blue clay + shell | 2 | 35 |
| med. sand | 35 | 50 |
| blue clay | 50 | 60 |
| Coarse sand | 60 | 70 |

| FORMATIONS (Continued) | FROM | TO |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| IF MORE SPACE IS NEEDED, USE BACK | | |

RECEIVED
JUL 19 1993

If well telescopes please sketch and show depths.

GROUND LEVEL




SECTION 12

Please indicate well location X.

ADDITIONAL INFORMATION

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