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	Q 468
CODED	✓
DATE WELL COMPLETED	2-14-94
PERMIT NUMBER	
NAME OF DRILLING FIRM	Coast Water Well Ser. Inc

NAME & MAILING ADDRESS OF LANDOWNER
Velma Rice
Hwy 90
Pascagoula Ms

WELL LOCATION SEC	TOWNSHIP	RANGE
27	7 N (S)	5 E (W)

DISTANCE	DIRECTION	NEAREST TOWN
1/2 Miles	East of	Moss Point

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 1

Pump Capacity (GPM)	No. of Stages	Setting Depth
11	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.)
230'	2"	230'
Type of Casing	**Hole Depth**	**Depth to Static Water Level**
PVC	240'	30'

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

WELL GROUTED TO A DEPTH OF 26 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

Top of Lap Pipe or Reduction in Casing FEET

IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

SCREEN DATA

Diameter - Inches	Length - Feet	Slot Size - Inches
2"	10'	.008
Screen Type		**Depth to Bottom - Feet**
PVC		240'

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
fill dirt	0	3
Black clay	3	15
Med. sand	15	25
Blue clay	25	60
Coarse sand & gravel	160	160
Blue clay	160	190
Med. sand	190	215
Blue clay	215	220
Med. sand	220	240

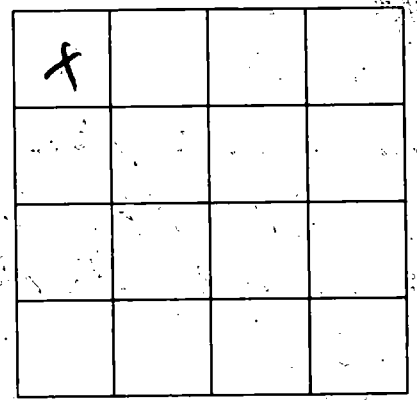
FORMATIONS (Continued)	FROM	TO

IF MORE SPACE IS NEEDED USE BACK

RECEIVED
MAR 17 1994
Dept. of Environmental Quality
Office of Land & Water Resources

If well telescopes please sketch and show depths.

GROUND LEVEL



SECTION 27

Please indicate well location X.

ADDITIONAL INFORMATION

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