

**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  
Cocke

WELL NUMBER CODED  
QV-2208

DATE WELL COMPLETED  
1-3-02

PERMIT NUMBER

NAME OF DRILLING FIRM  
Coastal Water Well Service

NAME & MAILING ADDRESS OF LANDOWNER  
Gene Kirkland

Orange Lake Rd

Latitude:  
Longitude: Moss Point, Ms.

WELL LOCATION. SEC TOWNSHIP RANGE  
23 7 N 5 E

DISTANCE DIRECTION NEAREST TOWN  
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

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>Top Soil</u>	<u>0</u>	<u>2</u>
<u>Orange Clay</u>	<u>2</u>	<u>14</u>
<u>White Coarse Sand</u>	<u>14</u>	<u>140</u>
<u>Blue Clay</u>	<u>140</u>	<u>178</u>
<u>Gray Medium + Low Sand</u>	<u>178</u>	<u>231</u>

**WELL DATA**

Well Depth <u>231'</u>	Casing Diameter (In.) <u>2"</u>	Casing Length (Ft.) <u>221'</u>
Type of Casing <u>PVC</u>	Hole Depth <u>231'</u>	Depth to Static Water Level <u>20'</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>231'</u>	

**RECEIVED**

MAR 15 2002

Dept. of Environmental Quality  
Office of Land & Water Resources

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 Ridgell 472  
Signature of Licensed Driller and License No.

3/8/02  
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

X			

SECTION 23

Please indicate well location X.

Pump Capacity (GPM) <u>8.5</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): 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.