

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 <i>Jackson</i> |
| WELL NUMBER CODED <i>R-</i> |
| DATE WELL COMPLETED <i>12-18-01</i> |

| |
|--|
| PERMIT NUMBER |
| NAME OF DRILLING FIRM <i>Coast Water Well Service</i> |

| | | | |
|--|------------|----------------------|-----------------------|
| NAME & MAILING ADDRESS OF BANDOWNER <i>Juliaette Purser Clubhouse RD MOSS POINT MS</i> | | | |
| Latitude: Longitude: | | | |
| WELL LOCATION | SEC | TOWNSHIP | RANGE |
| | <i>1</i> | <i>7^N</i> | <i>5^{EW}</i> |
| DISTANCE | DIRECTION | NEAREST TOWN | |
| <i>6</i> Miles | <i>ENE</i> | of <i>Moss Point</i> | |
| OTHER LANDMARK | | | |
| WELL PURPOSE: <input checked="" type="checkbox"/> Home, <input type="checkbox"/> Irrigation, <input type="checkbox"/> Municipal, <input type="checkbox"/> Industrial, <input type="checkbox"/> Fish Pond, etc. | | | |

| PUMP DATA | | |
|--|--|------------|
| PUMP TYPE (Circle One): Submersible, Turbine, Jet, <input type="checkbox"/> Flowing Well, Other (Describe) _____ | | |
| POWER TYPE (Circle One): Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P | | |
| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM | TO |
| <i>TOP Soil</i> | <i>0</i> | <i>2</i> |
| <i>Gray Clay</i> | <i>2</i> | <i>08</i> |
| <i>WHITE COARSE Sand</i> | <i>28</i> | <i>60</i> |
| <i>Blue Clay</i> | <i>60</i> | <i>124</i> |
| <i>Gray coarse Sand</i> | <i>124</i> | <i>165</i> |
| REC'D JAN 24 2002 | | |
| Top of Lap Pipe or Reduction in Casing | | |
| FEET | IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE | |

| WELL DATA | | |
|---|------------------------------------|--|
| Well Depth <i>165'</i> | Casing Diameter (In.) <i>2"</i> | Casing Length (Ft.) <i>155'</i> |
| Type of Casing <i>PVC</i> | Hole Depth <i>165'</i> | Depth to Static Water Level <i>5'</i> |
| TYPE OF COMPLETION: (Circle One or More): <input checked="" type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped, <input checked="" type="checkbox"/> Natural Development, <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other (Describe) _____ | | |
| WELL GROUTED TO A DEPTH OF <i>10</i> FEET Type Grout (circle one): Cement, Bentonite, or Mix | | |

| SCREEN DATA | | |
|--------------------------------|---------------------------------------|-----------------------------------|
| Diameter - Inches <i>2"</i> | Length - Feet <i>10'</i> | Slot Size - Inches <i>.008</i> |
| Screen Type <i>pvc</i> | Depth to Bottom - Feet <i>165'</i> | |

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.

Josh R. Hill 472
Signature of Licensed Driller and License No.

1/18/02
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

| | | | |
|--|--|--|---|
| | | | X |
| | | | |
| | | | |
| | | | |

SECTION 1

Please indicate well location X.

| | | |
|---------------------------------|---------------------------|----------------------------------|
| Pump Capacity (GPM) <u>6</u> | No. of Stages <u>1</u> | Setting Depth <u> </u> 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

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