

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 PEARL RIVER	
WELL NUMBER S-39	CODED
DATE WELL COMPLETED 9/23/03	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Harrington Drilling Co</i>
<i>0-584</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Janet Harrison 158 St Angela Poplarville, MS 39470</i>			
Latitude:			
Longitude:			
WELL LOCATION	SEC 5	TOWNSHIP H	RANGE 14 S N E W
DISTANCE 10 Miles	DIRECTION S.E.		NEAREST TOWN <i>Poplarville</i>
OTHER LANDMARK			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. <i>Home</i>			

PUMP DATA		
PUMP TYPE (Circle One): Submersible, Turbine, <u>Jet</u> Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): <u>Electric</u> , Tractor, Diesel, Gasoline, Butane, Other (Describe) <u>1 HP</u> H/P _____		
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>grey & white clay</i>	<i>0'</i>	<i>23'</i>
<i>B. Que green clay</i>	<i>23'</i>	<i>43'</i>
<i>Tan & white clay</i>	<i>43'</i>	<i>64'</i>
<i>fine tan sand</i>	<i>64'</i>	<i>68'</i>
<i>med fine grain grey sand</i>	<i>68'</i>	<i>83'</i>
<i>83' T.D</i>		
RECEIVED		
OCT 23 2003		
BY: OLWE		
Top of Lap Pipe or Reduction in Casing		
FEET	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE	

WELL DATA		
Well Depth 83'	Casing Diameter (In.) 2"	Casing Length (Ft.) 68'
Type of Casing <i>PVC</i>	Hole Depth 83'	Depth to Static Water Level 64'
TYPE OF COMPLETION: (Circle One or More): <u>Gravel Packed</u> , Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) _____		
WELL GROUTED TO A DEPTH OF 20 FEET Type Grout (circle one): <u>Cement</u> , Bentonite, or Mix		

SCREEN DATA		
Diameter - Inches 2"	Length - Feet 15'	Slot Size - Inches .008
Screen Type <i>PVC Slotted</i>	Depth to Bottom - Feet 83'	

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.

Ol Harrington 0-584
Signature of Licensed Driller and License No.

10/20/03
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

X			

SECTION 5

Please indicate well location X.

Pump Capacity (GPM) <i>JET</i>	No. of Stages <i>2 stage</i>	Setting Depth <i>let set at 66'</i>	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

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