

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY
Bureau of Land and Water Resources

P. O. Box 10631
Jackson, MS 39289-0631
WATER WELL DRILLERS LOG

COUNTY WELL LOCATED <i>Stone</i>	
WELL NUMBER <i>H</i>	CODED
DATE WELL COMPLETED <i>2000</i> <i>7-16-92</i>	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Coast Water Well Serv. Inc.</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Francis Seymour</i>			
WELL LOCATION: SEC <i>017</i> TOWNSHIP <i>S 9</i> RANGE <i>E 01</i>			
DISTANCE _____ Miles		DIRECTION _____ of <i>Rensselaers Springs</i>	
NEAREST TOWN _____			
OTHER LANDMARK _____			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.			

PUMP DATA		
PUMP TYPE (Circle One): Submersible, Turbine, <input checked="" type="radio"/> <i>Jet</i> Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): <input checked="" type="radio"/> <i>Electric</i> , Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P <i>1</i>		
Pump Capacity (GPM) <i>10</i>	No. of Stages <i>2</i>	Setting Depth _____ FT.
PUMP TEST		
Well yielded _____ GPM with a drawdown of _____ ft. after _____ hours of pumping		

WELL DATA		
Well Depth <i>160'</i>	Casing Diameter (In.) <i>2"</i>	Casing Length (Ft.) <i>155'</i>
Type of Casing <i>PVC</i>	Hole Depth <i>160'</i>	Depth to Static Water Level <i>10'</i>
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="checkbox"/> <i>Natural Development</i> , <input type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped, <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other (Describe) _____		
Top of Lap Pipe or Reduction in Casing _____ FEET		
IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE		

LOG DATA	
TYPE OF LOG RUN (Circle One): Electric, Gamma Ray, Density, Sonic, Neutron, Other (Describe) _____ <input checked="" type="radio"/> <i>No Log Run</i>	
Name of Organization Running Log _____	

SCREEN DATA		
Diameter - Inches <i>2 1/2</i>	Length - Feet <i>5'</i>	Slot Size - Inches <i>00</i>
Screen Type _____		Depth to Bottom - Feet <i>.004</i>

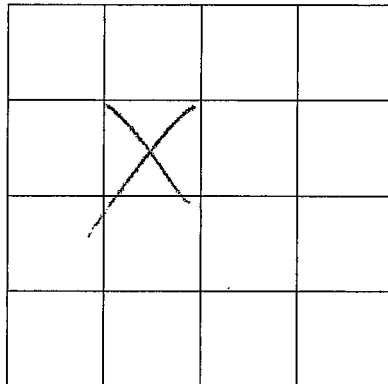
GEOLOGIC DATA (Office Use Only)			
Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test
Driller's Remarks _____			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
<i>top soil</i>	<i>0</i>	<i>2</i>	RECEIVED OCT 07 1992 Dept. of Environmental Quality Bureau of Land & Water Resources		
<i>shaly clay</i>	<i>2</i>	<i>12</i>			
<i>coarse sand/gravel</i>	<i>12</i>	<i>20</i>			
<i>blue clay</i>	<i>20</i>	<i>145</i>			
<i>fine to med sand</i>	<i>145</i>	<i>160</i>			

IF MORE SPACE IS NEEDED, USE BACK

If well telescopes please sketch and show depths.

GROUND LEVEL



SECTION _____

Please indicate well location X.

ADDITIONAL INFORMATION

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