

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 Choctaw	
WELL NUMBER D58	CODED
DATE WELL COMPLETED 10/22/96	

PERMIT NUMBER
NAME OF DRILLING FIRM GeoScience Eng.
3573-CD4

NAME & MAILING ADDRESS OF LANDOWNER MS Lignite Corp.			
Latitude: 33° 23' 25" Longitude: 89° 16' 10"			
WELL LOCATION	SEC	TOWNSHIP	RANGE
NW/SE	29	18	S 10 W
DISTANCE	DIRECTION	NEAREST TOWN	
Miles	of		
OTHER LANDMARK			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. Observation			

PUMP DATA		
PUMP TYPE (Circle One): <input checked="" type="radio"/> Submersible, <input type="radio"/> Turbine, <input type="radio"/> Jet, <input type="radio"/> Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): <input type="radio"/> Electric, <input type="radio"/> Tractor, <input type="radio"/> Diesel, <input type="radio"/> Gasoline, <input type="radio"/> Butane, Other (Describe) _____ H/P _____		
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
middle Wilcox		
Note: pump used for water samples		
Top of Lap Pipe or Reduction in Casing		
FEET	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE	

WELL DATA		
Well Depth 122'	Casing Diameter (In.) 4"	Casing Length (Ft.) 115
Type of Casing PVC	Hole Depth 125'	Depth to Static Water Level
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped, <input type="checkbox"/> Natural Development, <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other (Describe) _____		
WELL GROUTED TO A DEPTH OF _____ FEET Type Grout (circle one): Cement, Bentonite, or Mix		

SCREEN DATA		
Diameter - Inches 4"	Length - Feet 7'	Slot Size - Inches .010
Screen Type PVC	Depth to Bottom - Feet 122	

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.

PPhillips
8/18/03

Signature of Licensed Driller and License No. _____ Date _____

Additional Information Required On Back
Data from lignite mine project files