

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>Hancock</i>	
WELL NUMBER <i>G-158</i>	CODED
DATE WELL COMPLETED <i>1-13-03</i>	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>Thompson Bros.</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>Venture oil & gas</i> <i>1104 west 1st St. Suite 4</i> <i>Lawrel, MS</i>			
Latitude: Longitude:			
WELL LOCATION	SEC <i>19</i>	TOWNSHIP <i>7 N</i>	RANGE <i>14 E</i>
DISTANCE <i>1</i> Miles	DIRECTION <i>N</i>	NEAREST TOWN <i>Kila</i>	
OTHER LANDMARK			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. <i>rig supply</i>			

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 _____			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>sandy clay</i>	<i>0</i>	<i>30</i>
<i>good sand</i>	<i>30</i>	<i>50</i>
<i>sand & clay strips</i>	<i>50</i>	<i>140</i>
<i>blue sand</i>	<i>140</i>	<i>190</i>
<i>sand & clay</i>	<i>190</i>	<i>200</i>

WELL DATA		
Well Depth <i>190'</i>	Casing Diameter (In.) <i>4</i>	Casing Length (Ft.) <i>170</i>
Type of Casing <i>PVC</i>	Hole Depth <i>200</i>	Depth to Static Water Level <i>28</i>
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 <i>20</i> FEET Type Grout (circle one): Cement, <input checked="" type="radio"/> Bentonite, or Mix
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SCREEN DATA		
Diameter - inches <i>4</i>	Length - Feet <i>20</i>	Slot Size - inches <i>.01</i>
Screen Type <i>pvc slot</i>	Depth to Bottom - Feet <i>190</i>	

RECEIVED	
FEB 12 2003	
BY: OLWR	
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.

John Thompson *0-0679* *2-10-03*
Signature of Licensed Driller and License No. Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

	X		

SECTION _____

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth	FT.
85		80	

PUMP TEST

Well yielded 100 GPM with
 a drawdown of 18 ft.
 after airlift 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.