**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 | Humphreys |
| WELL NUMBER | J-99 |
| CODED | |
| DATE WELL COMPLETED | 4-11-01 |
| PERMIT NUMBER | |
| NAME OF DRILLING FIRM | Irrigation Equipment Inc. Indianola, MS |

NAME & MAILING ADDRESS OF LANDOWNER
TNT Farms
303 East Jackson
Belzoni, MS 39038

Latitude:
Longitude:

| WELL LOCATION | SEC | TOWNSHIP | RANGE |
|---|---|---|---|
| sw/nw | 2 | 14N (N / S) | 3W (E / W) |

| DISTANCE | DIRECTION | NEAREST TOWN |
|---|---|---|
| Miles | West | Silver City |

OTHER LANDMARK

WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.
Irrigation Pivot

## WELL DATA

| Well Depth | Casing Diameter (In.) | Casing Length (Ft.) |
|---|---|---|
| 110 | 10" | 70 |

| Type of Casing | Hole Depth | Depth to Static Water Level |
|---|---|---|
| pvc | 110 | 21ft. |

TYPE OF COMPLETION: (Circle One or More):
Gravel Packed, Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) _____

WELL GROUTED TO A DEPTH OF _____ FEET
Type Grout (circle one): Cement, Bentonite, or Mix

## SCREEN DATA

| Diameter - Inches | Length - Feet | Slot Size - Inches |
|---|---|---|
| 10 | 40 | .050 |

| Screen Type | Depth to Bottom - Feet |
|---|---|
| pvc | 110 |

## 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 40

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM | TO |
|---|---|---|
| Clay | 0 | 35 |
| Clay/Fine Sand | 35 | 45 |
| Med. Sand | 45 | 55 |
| Med. Sand/gravel | 55 | 65 |
| Gravel | 65 | 75 |
| Med. Sand/gravel | 75 | 85 |
| Gravel | 85 | 110 |

REC'D AUG 28 2001

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.

0-439 — Signature of Licensed Driller and License No.

8-24-01 — Date

Additional Information Required On Back