

**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>Madison</i>	
WELL NUMBER <i>J-77</i>	CODED
DATE WELL COMPLETED <i>4-28-04</i>	

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

NAME & MAILING ADDRESS OF LANDOWNER <i>Grey Wolf Drilling 333 Texas St Suite 925 Shreveport, LA</i>
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Latitude:  
Longitude:

WELL LOCATION	SEC <i>36</i>	TOWNSHIP <i>8<sup>N</sup></i>	RANGE <i>2<sup>E</sup></i>
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DISTANCE <i>1 1/2</i> Miles	DIRECTION <i>SE</i>	NEAREST TOWN <i>Bluksat</i>
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OTHER LANDMARK

WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.  
*rig supply*

Well Depth <i>560</i>	Casing Diameter (In.) <i>4</i>	Casing Length (Ft.) <i>500</i>
Type of Casing <i>PVC</i>	Hoje Depth <i>580</i>	Depth to Static Water Level <i>137</i>

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

WELL GROUTED TO A DEPTH OF *30* FEET  
Type Grout (circle one): Cement,  Bentonite, or Mix

Diameter - Inches <i>4</i>	Length - Feet <i>60</i>	Slot Size - Inches <i>.008</i>
Screen Type <i>PVC Slotted</i>	Depth to Bottom - Feet <i>560</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* *2 1/2*

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>clay</i>	<i>0</i>	<i>215</i>
<i>seashells + clay</i>	<i>215</i>	<i>245</i>
<i>rock</i>	<i>245</i>	<i>247</i>
<i>sandy clay + seashells</i>	<i>247</i>	<i>270</i>
<i>rock</i>	<i>270</i>	<i>275</i>
<i>sand, clay + seashells</i>	<i>275</i>	<i>420</i>
<i>fine sand</i>	<i>420</i>	<i>560</i>

**RECEIVED**

MAY 12 2004

**BY: OLWIR**

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.

Signature of Licensed Driller and License No. \_\_\_\_\_ Date \_\_\_\_\_

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL


SECTION 35

Please indicate well location X.

Pump Capacity (GPM) <u>85</u>	No. of Stages	Setting Depth <u>160</u> FT.
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PUMP TEST

Well yielded 50 GPM with  
a drawdown of 9 ft.  
after air lift hours of pumping

LOG DATA

TYPE OF LOG RUN (Circle One):  
Electric, Gamma Ray, Density, Sonic, No Log Run,  
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.