

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

Stone

WELL NUMBER CODED

C-122

DATE WELL COMPLETED

12-2-03

PERMIT NUMBER

NAME OF DRILLING FIRM

Boones Water Well

NAME & MAILING ADDRESS OF LANDOWNER

Ricardo Willis

322 John Willis Rd

Latitude: Longitude: Wiggins, MS 39577

WELL LOCATION. SEC TOWNSHIP RANGE

36 2 N 11 E

DISTANCE DIRECTION NEAREST TOWN

5 Miles SE of Wiggins

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

WELL DATA

| | | |
|----------------|-----------------------|-----------------------------|
| Well Depth | Casing Diameter (In.) | Casing Length (Ft.) |
| 160 | 2 | 130 |
| Type of Casing | Hole Depth | Depth to Static Water Level |
| Pulsch 40 | 160 | 60 |

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

WELL GROUTED TO A DEPTH OF 10 FEET Type Grout (circle one): Cement, Bentonite, or Mix

SCREEN DATA

| | | |
|-------------------|------------------------|--------------------|
| Diameter - Inches | Length - Feet | Slot Size - Inches |
| 2 | 10 | #8 |
| Screen Type | Depth to Bottom - Feet | |
| Pulsch 40 | | |

PUMP DATA

PUMP TYPE (Circle One): Submersible, Turbine, Jet, Flowing Well. POWER TYPE (Circle One): Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) H/P 1

| DESCRIPTION OF FORMATIONS ENCOUNTERED | FROM | TO |
|---------------------------------------|------|-----|
| sand | 0 | 60 |
| Clay | 60 | 110 |
| sand | 110 | 160 |
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RECEIVED JAN 05 2004 BY: OLW/R

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. Johnny Pearson 0-0656

Date 12-29-03

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

| | | | |
|--|--|--|--|
| | | | |
| | | | |
| | | | |
| | | | |

SECTION _____

Please indicate well location X.

| | | |
|--|--------------------|----------------------------|
| Pump Capacity (GPM) 5 | No. of Stages 2 | Setting Depth _____ FT. |
| PUMP TEST | | |
| Well yielded _____ GPM with a drawdown of _____ ft. after _____ 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.