

**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 <u>Stone</u>	
WELL NUMBER <u>04005</u>	CODED
DATE WELL COMPLETED <u>02-23-04</u>	

PERMIT NUMBER
NAME OF DRILLING FIRM <u>Havard Drilling Co</u>

NAME & MAILING ADDRESS OF LANDOWNER <u>Avery D. Hood</u> <u>2835 HWY 15</u> <u>Wiggins MS 39577</u>			
Latitude: <u>30° 50.410 N</u> Longitude: <u>88° 58.873 W</u>			
WELL LOCATION	SEC <u>27</u>	TOWNSHIP <u>T2 N</u>	RANGE <u>R10 E</u>
DISTANCE <u>4</u> Miles	DIRECTION <u>East</u>	NEAREST TOWN <u>Wiggins</u>	
OTHER LANDMARK <u>1 mile S of ace on 15</u>			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc. <u>Home</u>			

PUMP DATA		
PUMP TYPE (Circle One): <u>Submersible</u> , Turbine, Jet, Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): <u>Electric</u> , Tractor, Diesel, Gasoline, Butane, Other (Describe) _____ H/P _____		
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<u>Topsand</u>	<u>0</u>	<u>5</u>
<u>Sand, fine to med</u>	<u>5</u>	<u>18</u>
<u>Clay</u>	<u>18</u>	<u>23</u>
<u>Sand, med</u>	<u>23</u>	<u>62</u>
<u>Clay</u>	<u>62</u>	<u>85</u>
<u>Sand, med</u>	<u>85</u>	<u>97</u>
<b>RECEIVED</b>		
<u>MAR 04 2004</u>		
<b>BY: OLWR</b>		
Top of Lap Pipe or Reduction in Casing		
FEET	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE	

WELL DATA		
Well Depth <u>97'</u>	Casing Diameter (In.) <u>4"</u>	Casing Length (Ft.) <u>87'</u>
Type of Casing <u>PVC 540</u>	Hole Depth <u>97</u>	Depth to Static Water Level <u>75</u>
TYPE OF COMPLETION: (Circle One or More): <u>Gravel Packed</u> , Underreamed, Telescoped, Natural Development, Open Hole, Other (Describe) _____		
WELL GROUTED TO A DEPTH OF <u>14</u> FEET Type Grout (circle one): Cement, Bentonite, or <u>MIX</u>		

SCREEN DATA		
Diameter - Inches <u>4"</u>	Length - Feet <u>10'</u>	Slot Size - Inches <u>.008</u>
Screen Type <u>WOP PVC 540</u>	Depth to Bottom - Feet <u>97'</u>	

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.

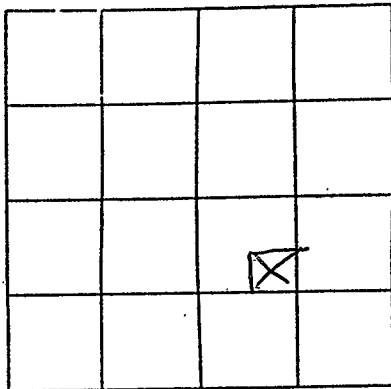
[Signature] 0673 #  
Signature of Licensed Driller and License No.

02-24-04  
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL



SECTION 34

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth	
<u>19</u>	<u>8</u>	<u>97</u>	FT.
PUMP TEST			
Well yielded <u>28</u> GPM with			
a drawdown of <u>22</u> ft.			
after <u>8</u> 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

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If more than one screen, show location of each on sketch.