

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Office of Land and Water Resources

P. O. Box 10631
Jackson, MS 39289-0631

WATER WELL DRILLERS LOG

STONE

COUNTY WELL LOCATED
Harrison

WELL NUMBER
G-96

CODED

DATE WELL COMPLETED
2/11/04

PERMIT NUMBER

NAME OF DRILLING FIRM
Matthews Drilling, Inc.

NAME & MAILING ADDRESS OF LANDOWNER
24032 Butch Kilton Lane

Shelby Harrison

Latitude: *30° 47.032*

Longitude: *89° 07.276*

WELL LOCATION: SEC *18* TOWNSHIP *3 N* RANGE *11 E*

DISTANCE _____ MILES DIRECTION _____ NEAREST TOWN *Wiggins*

OTHER LANDMARK _____

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

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*

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>Sand</i>	<i>0</i>	<i>60'</i>
<i>Blue Clay</i>	<i>60'</i>	<i>180'</i>
<i>Ford</i>	<i>180'</i>	<i>185'</i>
<i>Soap Stone</i>	<i>185'</i>	<i>300'</i>
<i>Sand</i>	<i>300'</i>	<i>350'</i>

RECEIVED

MAR 03 2004

BY: OLW/R

Top of Lap Pipe or Reduction in Casing _____ FEET

IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

WELL DATA

Well Depth *350'* Casing Diameter (In.) *2"* Casing Length (Ft.) *330'*

Type of Casing *PVC* Hole Depth *352'* Depth to Static Water Level *119'*

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 *2"* Length - Feet *20'* Slot Size - Inches *0.084*

Screen Type *PVC* Depth to Bottom - Feet *350'*

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.

Shelby Harrison #690
Signature of Licensed Driller and License No.

2/11/04
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

SECTION _____

Please indicate well location X.

Pump Capacity (GPM) <i>5 GPM</i>	No. of Stages <i>2</i>	Setting Depth <i>130'</i> FT.
PUMP TEST		
Well yielded <i>3 1/2</i> GPM with a drawdown of <i>135</i> ft. after <i>24</i> 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.