

**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>ITDC</i>	
WELL NUMBER <b>D-103</b>	CODED
DATE WELL COMPLETED <i>3-15-04</i>	

PERMIT NUMBER
NAME OF DRILLING FIRM <i>N. MS Well Drilling</i>
<i>FRANK LANGFORD</i>

NAME & MAILING ADDRESS OF LANDOWNER <i>562 0013</i>			
<i>Kirk Moore (Lot #11)</i>			
<i>(No 911) Coldwater</i>			
<i>Bett-Meadow Farms</i>			
Latitude:			
Longitude:			
WELL LOCATION	SEC	TOWNSHIP	RANGE
	<i>33</i>	<i>4 S</i>	<i>5 E</i>
DISTANCE	DIRECTION	NEAREST TOWN	
<i>5</i> Miles	<i>R</i>	<i>Independence</i>	
OTHER LANDMARK <i>CA LINE RD</i>			
<i>W/OFF STATE MARSHALL</i>			
WELL PURPOSE (Home) Irrigation, Municipal, Industrial, Fish Pond, etc.			

PUMP DATA		
PUMP TYPE (Circle One): Submersible, Turbine, Jet, Flowing Well, Other (Describe)		
POWER TYPE (Circle One): Electric, Tractor, Diesel, Gasoline, Butane, Other (Describe) <i>H/P</i>		
DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
<i>DIRT</i>	<i>0</i>	<i>20</i>
<i>SAND</i>	<i>20</i>	<i>60</i>
<i>mixed clay</i>	<i>60</i>	<i>90</i>
<i>w/clay</i>	<i>90</i>	<i>110</i>
<i>w/SAND</i>	<i>110</i>	<i>170</i>
<b>RECEIVED</b>		
<b>MAR 22 2004</b>		
<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 <i>170</i>	Casing Diameter (In.) <i>4</i>	Casing Length (Ft.) <i>20</i>
Type of Casing <i>PVS</i>	Hole Depth <i>170</i>	Depth to Static Water Level <i>90</i>
TYPE OF COMPLETION: (Circle One or More): Gravel Packed, Underreamed, Telescoped, <u>Natural Development</u> , Open Hole, Other (Describe)		
WELL GROUTED TO A DEPTH OF <i>10</i> FEET Type Grout (circle one): Cement, <u>Bentonite</u> , or Mix		

SCREEN DATA		
Diameter - Inches <i>4</i>	Length - Feet <i>10</i>	Slot Size - Inches <i>10/3</i>
Screen Type <i>slotted PVC</i>		Depth to Bottom - Feet <i>170</i>

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.

*Frank Langford 0622*  
Signature of Licensed Driller and License No.

*3-18-04*  
Date

Additional Information Required On Back

If well telescopes please sketch and show depths.

GROUND LEVEL

			X

SECTION 33

Please indicate well location X.

Pump Capacity (GPM)	No. of Stages	Setting Depth
12	12	140 FT.

PUMP TEST

Well yielded 15+ GPM with  
a drawdown of 3 ft.  
after 3 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.