



MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

WELL SCHEDULE

FIPS: 19

WELL: D58

LOG NO.: _____

Recorded by: PPhillips Data Source: Lignite mine files Driller's log Date: 8/19/03
 County: Choctaw Permit No.: _____ DOH No.: _____
 Quad: Tomnolen Elevation: 401
 1/4: _____ 1/4: SE 1/4: NW 1/4: SE Sec.: 29 T: 18 R: 10

Plotted on quad?: _____ In field? _____ From drillers log? _____ From permit? _____
 Latitude: _____ Longitude: _____ GPS? 12/7/99 From Quad? _____
 Primary aquifer: WLCXM Secondary aquifer: _____
 Use: OB Well status: _____ Local well name: 3573-CD4
 Owner: MS Lignite Corp.

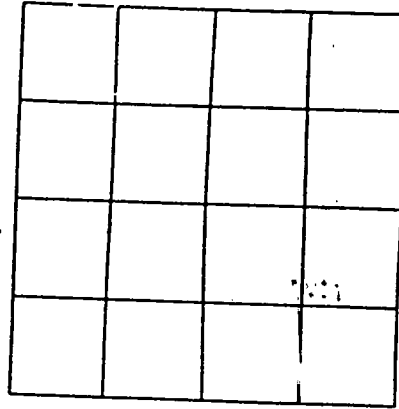
Date completed: 10/22/96 Driller: GeoScience Eng. Well depth: 122 Hole Depth: 125
 Pump type: S,* Power type: None Pump capacity: _____ HP: _____
 Casing interval: 0-115 Casing length: 115' Casing diameter: 4" Casing type: PVC
 Casing interval: _____ Casing length: _____ Casing diameter: _____ Casing type: _____
 Screen interval: 115-122 Screen length: 7' Screen diameter: 4" Screen type: PVC
 Screen interval: _____ Screen length: _____ Screen diameter: _____ Screen type: _____
 Type of logs: E, GR Log interval: _____
 Initial water level: _____ Date: _____ M.P. description: _____

Water Quality Data? _____ Source: _____ Reliability: _____
 Water Level Data? _____ Source: _____ Reliability: _____
 Pump Test Data? _____ Source: _____ Reliability: _____
 Water Use Data? _____ Source: _____ Reliability: _____

* The pump is used for water samples. A generator is brought to site for power in remote.

If well telescopes please sketch and show depths.

GROUND LEVEL



SECTION _____

Please indicate well location X.

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

Century Geophysical Corp.

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.

Water Well Field Data Form

USGS # / FP D58 County Chester Health # _____ Aquifer _____

Owner Wayne's #: Y 3573 Local Name 3573-CD4

Quad Map _____ Location _____ Elevation _____

20 B	33	23.461	33 23 27.06 ³⁹
390	89	16.124	89 16 7.96

Measuring Point Top of pvc fitting on top of block plate on pvc casing
ground inside stud cover above _____ Date 12/7/99 Party _____

Remarks Could not sound pump in casing

Tape Down #	1	2	3	4
Held				
Wet				
Difference	28.42			
MP Correction	2.63			
Water Level				

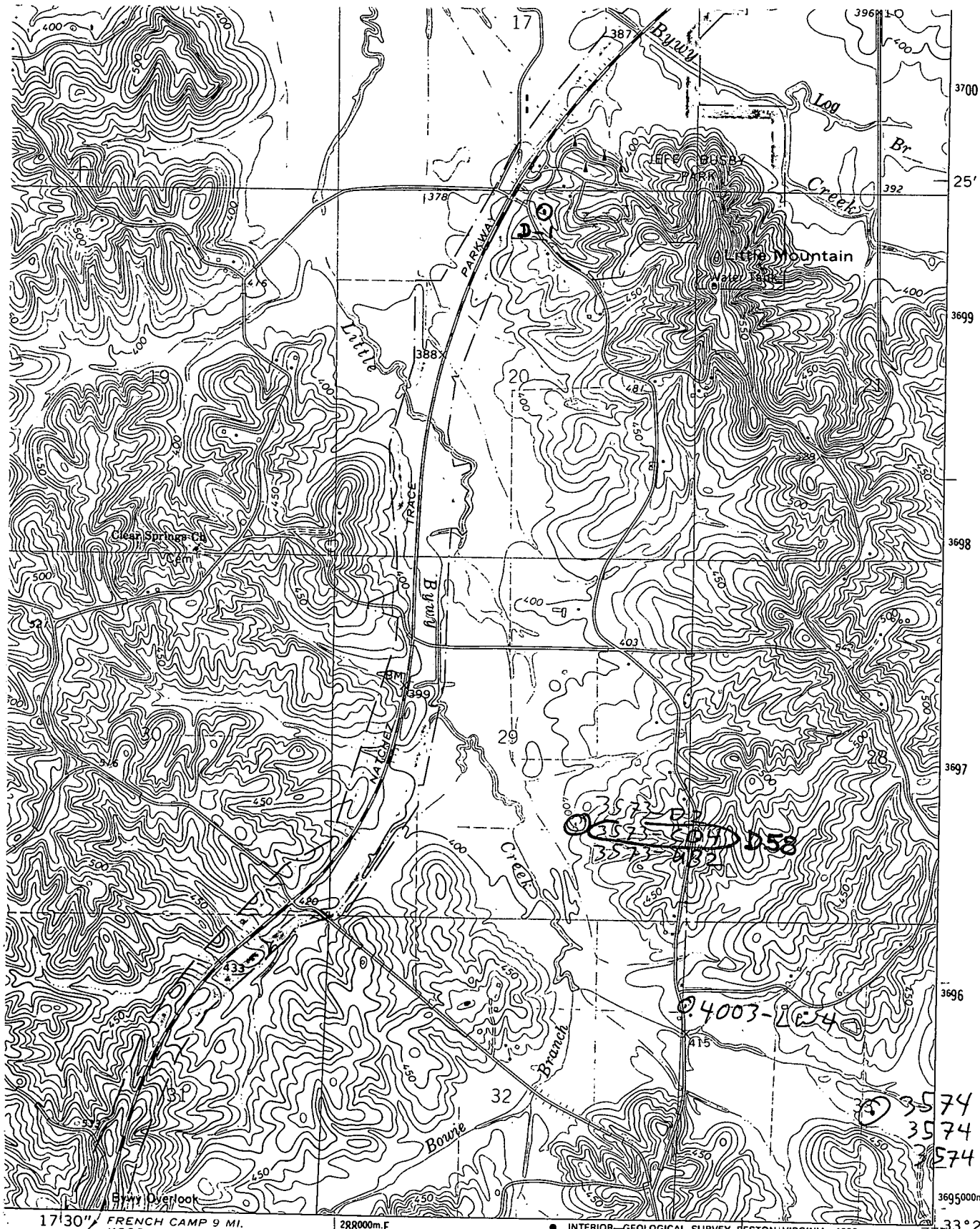
Additional remarks and/or sketches on back (circle if any)



D0058-019. 12/7/1999

Well # 9579-CD4

Choctaw Co. Well has pump in it



17°30' FRENCH CAMP 9 MI.
KOSCIUSKO 28 MI.

288000m.E.

● INTERIOR—GEOLOGICAL SURVEY, RESTON, VIRGINIA—1986

33°22'30"
89°15'

3695000m.N.

11E

ROAD CLASSIFICATION

Heavy-duty _____ Light-duty _____
Medium-duty _____ Unimproved dirt _____

U.S. Route

JACKERMAN
3/150 / SW



QUADRANGLE LOCATION

TOMNOLEN, MISS.
33089-D3-TF-024