WELL SCHEDULE

FIPS: 19
WELL: G40
LOG NO.: 

Recorded by: Phillips  Data Source: Driller's log  Date: 8/20/03
County: Choctaw  Permit No.:  DOH No.: 
Quad: Ackerman  Elevation: 501
¼ NW ¼ NW ¼ NW ¼ NW  Sec.: 3  T: 17N  R: 10E

Plotted on quad?: In field? From drillers log? From permit?
Latitude: Longitude: GPS? 8/13/01 From Quad?
Primary aquifer: WLCXM  Secondary aquifer:
Use: OB  Well status: Local well name: 4006-082
Owner: MS Lignite Corp.

Date completed: 11/10/00  Driller: Geoscience Eng  Well depth: 100  Hole Depth: 100
Pump type: None  Power type:  Pump capacity:  HP: 
Casing interval: 0-90  Casing length: 90' Casing diameter: 2' Casing type: PVC
Casing interval:  Casing length: Casing diameter: Casing type: 
Screen interval: 90-100  Screen length: 10' Screen diameter: 2' Screen type: PVC
Screen interval:  Screen length: Screen diameter: Screen type: 
Type of logs:  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:
**County Well Located:**
- **Chocotaw**

**Well Number:** G40

**Date Well Completed:** 11/10/00

**Name & Mailing Address of Landowner:**

**Latitude:** 33° 22' 19" N
**Longitude:** 89° 14' 39" W

**Well Location:** NW/NW 3 17 S 10 E

**Distance to Nearest Town:**

**Other Landmark:** Middle Wilcox

**Well Purpose:**
- Home, Irrigation, Municipal, Industrial, Fan Pond, etc.

**Well Data:**

<table>
<thead>
<tr>
<th>Depth</th>
<th>Diameter (in.)</th>
<th>Casing Diameter (in.)</th>
<th>Casing Length (ft.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>100</td>
<td>2</td>
<td>90</td>
<td></td>
</tr>
</tbody>
</table>

**Type of Casing:** PVC

**Type of Completion:**
- Gravel Pack
- Underreamed
- Telescoped
- Natural Development
- Open Hole
- Other

**Well Grouted to a Depth of**

**Screen Data:**

<table>
<thead>
<tr>
<th>Diameter (in.)</th>
<th>Length (ft.)</th>
<th>Slot Size (inches)</th>
<th>Screen Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>10</td>
<td>10</td>
<td>PVC</td>
</tr>
</tbody>
</table>

**Top of Lap Pipe or Reduction in Casing:**

**Signature of Licensed Driller and License No.:**

**Date:** 8/18/03

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.

**Additional Information Required On Back:**
Data from Table 2511-1 in lignite mine project files.
If well telescopes please sketch and show depths.

GROUND LEVEL

<table>
<thead>
<tr>
<th>SECTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please indicate well location X.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Pump Capacity (GPM)</th>
<th>No. of Stages</th>
<th>Setting Depth</th>
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</thead>
<tbody>
<tr>
<td>FT.</td>
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</tbody>
</table>

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: No log in files

GEOLOGIC DATA (Office Use Only)

<table>
<thead>
<tr>
<th>Surface Elevation</th>
<th>Geologic Unit</th>
<th>Unit Thickness</th>
<th>Depth to Top</th>
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<tbody>
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</table>

Suba. 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 / FIP:  
County: Choctaw  
Nest #:  
Aquifer: WLCXW

Owner: MS Lignite Mining Co  
Local Name: 4006-082

Spud Map:  
Location:  
Elevation:  

**Measuring Point:** Top of inner PVC casing

**Date:** 8/13/01  
**Party:** LWDJ1K

**Remarks:**
- GPS
- 32.37186
- 99.24426

<table>
<thead>
<tr>
<th>Tape Down #</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
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<tbody>
<tr>
<td>Field</td>
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<tr>
<td>Wet</td>
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<tr>
<td>Difference</td>
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<tr>
<td>MP Correction</td>
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<tr>
<td>Water Level</td>
<td>63.09</td>
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<td></td>
</tr>
</tbody>
</table>

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