COUNTY WELLL	OCATED	MIS	SISSIPPI D	EPARTMENT OF ENVIR			
WELL NUMBER		PERMIT NUMBER		QUALITY Office of Land and Water Resources			
NAME OF DRILLING FIRM				p.	O. Box	10621	
DATE WELL COMPLETED FASTEY Water			nwell	Jackson, MS	39289	9-0631	
NAME & MAILING ADDRESS OF LANDOWNER				WATER WELL DR	ILLER	3 LOG	
NAME & MAILING ADDRESS OF LANDOWNER				PUMP DATA			
Kelvin Sterling Lane			PUMPTY	PUMP TYPE (Circle One):			
11/ STERTING LONE			Submersible Turbine, Jet Flowing Well, Other (Describe)				
Liberty Ms-				POWER TYPE (Circle One): Electric Tractor, Diesel, Gasoline, Butane,			
Latitude:			Other (Describe) H/P				
WELL LOCATION	SEC TO	WNSHIP RANGE	DESCRIPTION OF FORMATIONS ENCOUNTERED FROM TO				
	229	31 8 4E W	·	Clay	0	10	
DISTANCE	DIRECTION	NEAREST TOWN		Sand		60	
	Miles	01		GRave/	60	80	
OTHER LANDMARK				Clay	00	100	
				,		 	
WELL PURPOSE Home Irrigation, Municipal, Industrial, Fish Pond, etc.					· - · · · · ·	 	
Ĺ							
WELL DATA Well Depth Casing Diameter (in.) Casing Length (FL)							
Well Depth	Casing Diameter (in	Casing Length (Fi.)					
Type of Casing	Hole Depth	Depth to Static Water Level					
PV C.	1001					ļ	
TYPE OF COMPLETION: (Circle One or More):				· · · · · · · · · · · · · · · · · · ·			
Gravel Packed, Underreamed, Telescoped, Natural Development, Open Hole, Other				- BECEIVI	= 17	 	
(Describe)	pment, 3	pen Hole, Other		I I have had hone I W E	re here	\vdash	
WELL GROUP	ED TO A DEPT	HOF /o FEET		FEB 1 1 20	14.	 	
		nt, Bentonite, or Mix					
		 		M IO ·VB			
Diameter - Inches	SCREEN DA	Slot Size - Inches		Toron & Con said &			
4	20	.080	1	1		1	
Screen Type Depth to Bollom - Feel			Top of La	Top of Lap Pipe or Reduction in Casing			
Pre 285				FEET ONE SCREEN: USE BACK PAGE			
			·	1 421 0.1200.001.0020	- CONTROL		
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.							
\int_{Ω}	,, <u>e</u>	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		12-19-03			
Signature of Licensed Driller and License No.				Date			
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Additional Information Required On Back