			and the second second				
Desoto	MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL						
WELL NUMBER CODED	PERMIT NUMBER	QUALITY Office of Land and Water Resources					
	NAME OF DRILLING FIRM						
B-(9-03	Mason Water	بدورارح P. O. Box 10631 Jackson, MS 39289-0631 WATER WELL DRILLERS LOG				9-0631	Annahar dan dan dan Afrika
NAME & MAILING ADDRESS OF LANDOWNER		PUMP DATA					
831 NVECS	_cd-	PLIMPTY	E (Circle One):	110			
Byhalia Ms		Other (Des	terbine,	Jet	Flowin	g Well,	Section 2015 Section (Section 2)
Latitude: Longitude:		Electrica Other (Des	PE (Circle One): Tractor, Diesel, cribe)	Gasoli _ H/P -	ne.31-	utane,	
WELL LOCATION SEC	TOWNSHIP RANGE	DESCRIPTION	OF FORMATIONS ENCO	UNTERED	FROM	то	
<u> </u>	<u> 3855</u>	clay	d. it		<u>0</u>	5-	
DISTANCE DIRECTION	on nearest town Libration creek	we to	Sond Sond		<u> </u>	20	AND CONTRACTOR OF THE CONTRACT
OTHER LANDMARK	of	<u> </u>	3004		ටිට	55-	to the season manager and the season with the season of th
WELL PURPOSE (Home) trrigation, Mu	micipat, Industriat, Fish Pond, etc.				······································		
WELL D							
Well Depth Casing Diameter	(In.) Casing Length (Ft.)						
Type of Casing Hole Depth	Depth to Static Water Level		· · · · · · · · · · · · · · · · · · ·				
puc 95	18'						
TYPE OF COMPLETION: (Circ	ele One or More):	····	·				
	amed, Telescoped, Open Hole, Other		RECEN	/ED	<u> </u>		
WELL GROUTED TO A DEPTH OF FEET Type Grout (circle one): Cement, Bentonite, or Mix			OCT 0 9 2	2003			
SCREEN D	DATA		BY OLL	A/D			
Diameter - Inches Length - Feet	Slot Size - Inches		DI. OLV	/V [7]			
Screen Type	Depth to Bottom - Feet			ı	1	• 1	
)c	Depte to Boltom - Feet	Top of Lap F	Pipe or Reduction in C	_			
Pos			FEET ONE SCREE	OPED OR M EN: USE BA	ORE THAI CK PAGE	N .	
I certify that the well was	drilled constructed and a	completed	in cocculence	JA1: _11 _			
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.							
\wedge						ı	
Yous a. M.	0-620		10 - 3	2 _ ^	ح.	1	1
Signature of Licensed Dr	iller and License No.		<u>/U</u>	Date	<u>></u>	.	
-			-				
Additional Information Peguidad On Posts							