	ISSISSIPPI	DEPARTM	ENT OF ENVI			
WELL NUMBER CODED PERMIT NUMBER		☐ Office of	Land and Wa	QU. ter Reso	<b>ALIT</b> Durce	
MAME REPORTELING FIRM	- 1	-				
DAJE WELL COMPLETED   W.C. II YU	Maill Pump &		P. O. Box 1063 Jackson, MS 39289-063			
9-18-01 Well		WA	TER WELL DI	RILLERS	S LO	
NAME & MAILING ADDRESS OF LANDOWNER	] [	P	UMP DATA			
Sully La compuley	PUMP 1	YPE (Cirgle O	ne):			
1401 #13 COO MENENIY HUXY	Submer (I	sible, Tu Describe	bine, Jet	Flowing	g Well,	
Study 1113 34874.		TYPE				
Latitude: Longitude:	Electric Other (1	. Tractor. Describe)	Diesel, Caso	ine. B	utane.	
WELL LOCATION. SEC TOWNSHIP RANGE	DESCRIPT	ION OF FORMAT	IONS ENCOUNTERED	FROM	τo	
1 4 1 1 2 2	100	m		0	40	
DISTANCE DIRECTION NEAREST TOWN	7   JXL	$\alpha_{\perp}$		140	X	
		<del>U</del>		80	190	
OTHER LANDMARK	14/2	1		120	1/1	
WELL PURPOSE Home, Irrigation, Municipal, Industrial, Fish Pond, etc.				7.0	100	
WELL DATA	' ├──					
Well Depth / Casing Diameter (In.) Casing Length (FL)						
Type of Casing Hole Depth Depth to Static Water Level			<del></del>		:	
TYPE OF COMPLETION: (Circle One or More):  Gravel Packed Underreamed, Telescoped,						
Natural Development, Open Hole, Other (Describe)						
WELL GROUTED TO A DEPTH OFFEET	1					
Type Grout (circle one): Cement, Bentonite, or Mix	J					
SCREEN DATA			0001			
Diameter - Inches Length - Feet Slot Size - Inches	REC	DEC	31 200			
Screen Type Depth to Bottom - Feet	Top of L	ap Pipe or Red	uction in Casing			
PUC 160'	]	FEET	IF TELESCOPED OR ONE SCREEN: USE (	MUNICIPAL	N	
	<u>'</u>			MUN PAGE		
I certify that the well was drilled, constructed a Requirements of the Mississippi Department of Department of Health regulations and state law	of Environn	ted in accor nental Quali	dance with all ity and/or the N	applica ⁄iississip	ble pi	
Signature of Licensed Driller and License No.	<b>&gt;</b>	4	2 ද 2 (ල − උ) Date		-	

Additional Information Required On Back

if well telescopes please sketch and show depths.					100 p	mil	
	is a	6	. H.a. Offis	Mai	10-	141 - 3	
GROUND LEVEL				371		11	
			5.	<b>®</b>	,	- ,	
i si		SECTION  Please indicate well location X.  Pump Capacity (GPM)   No. of Stages   Setting Depth					
		PUMP TEST  Well yielded GPM with a drawdown of ft. hours of pumping					
		TYPE OF LOG RUN (Circle One): No Log Run, Electric, Gamma Ray, Density, < Sonic, Neutron, Other (Describe)					
		GEOLOGIC DATA (Office Use Only)					
			GEOL( ce Elev.	Geologic Unit	Unit Thickness		
	,	Subs	SWL	Date	Analysis	Aquiler Test	
		Dritter's Remarks					
. 4							
if more than one show location of							