MISSISSIPPI DEPARTMENT OF NATURAL RESOURCES JOCKSO! Bureau of Land and Water Resources CODED PERMIT NUMBER P.O. Box 10631 MAME OF DRILLING FIRM Jackson, Mississippi 39209 WATER WELL DRILLERS LOG NAME & MAILING ADDRESS OF LANDOWNER **PUMP DATA** PUMP TYPE (Circle One): Flowing Well, Submersible, Turbine. Other (Describe) POWER TYPE (Circle One): Electric Tractor, Diesel, Gasoline. Butane. Other (Describe) Pump Capacity (GPM) No. of Stages Setting Depth TOWNSHIP RANGE FT. PUMP TEST DISTANCE DIRECTION landeaue Well yielded _____ GPM with a drawdown of _____ WELL PURPOSE; Home, Irrigation, Municipal, Industrial, Fish Pond, etc. _____ hours of pumping after ____ LOG DATA **WELL DATA** Casing Diameter (In.) Casing Length (Ft.) TYPE OF LOG RUN (Circle One): No Log Run. Electric, Gamma Ray, Density, Sonic, Neutron, Other (Describe) Type of Casing Hole Depth Depth to Static Water Level Name of Organization Running Log TYPE OF COMPLETION: (Circle One or More): Gravel Packed. Underreamed, Telescoped, GEOLOGIC DATA (Office Use Only) Natural Development Open Hole, Other Geologic Unit Unit Thickness Surface Elev. Depth to Top (Describe) Top of Lap Pipe or Reduction in Casing Subs. SWL Date Analysis **Aquifer Test** IF TELESCOPED OR MORE THAN FEET ONE SCREEN: USE BACK PAGE Driller's Remarks **SCREEN DATA** Slot Size - Inches Length - Feet Diameter - Inches Depth to Bottom - Feet DESCRIPTION OF FORMATIONS ENCOUNTERED 124Streok2 Department of Natural Resou arse soullo 135

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If well telesc sketch and	copes please show depths.	• • •
GROUND LEVEL		
		X
		SECTION Please indicate well location X.
		ADDITIONAL INFORMATION

If more than one screen, show location of each on sketch.