COUNTY WELL LO			MIS	SSI	SSIPPI D	EPARTMENT OF ENVI						
WELL NUMBER CODED PERMIT NUMBER					 -	QUALITY Office of Land and Water Resources						
						Olivo of Lana and Tra	.01 11000	Juicoa				
N-21	01		F DRILLING FIRM				O. Box					
DATE WELL COMPLETED						Jackson, MS	39289	9-0631				
2-20-09 Water Well					<u>ب</u> ہ	WATER WELL DE	ILLERS	SLOG				
NAME & MAILING	ADDRESS OF LAND	OWNER				PUMP DATA						
Edelie	White							·				
	00,000			1	Submersi	PE (Circle One): ible Turbine, Jet	Claude	14/6/1				
111111	hite P	ſ			Submersible) Turbine, Jet Flowing Other (Describe)							
141 W	rule 1	<u>d</u>				TYPE (Circle One):						
Latitude:		4 . ,			Electric Tractor, Diesel, Gasoline, Butane,							
Longitude: [TOXWW	MY	ms 3948		Other (Describe) H/P							
WELL LOCATION.	SEC T	CHANGELIE	BANCE		DESCRIPTIO	N OF FORMATIONS ENCOUNTERED	FROM	то				
	*/2	Z	8 /B			2 el	0	25				
DISTANCE	DIRECTIO		NEAREST TOWN			Clas	25	35				
						50.0	52	20				
	Ailes S. L						7	0 -				
OTHER LANDMARI	<	F	Oxworth.				 					
						18.45.45.4						
WELL PURPOSE: H	eme, Irrigation, Mui	nicipal, Ind	lustrial, Fish Pond, etc.				 					
	•			·			ļ	 				
	WELL D					***************************************		ļ				
_	Casing Diameter (in.)	Casing Length (Ft.)				ļ ;					
80	4		60				ļ					
	Hole Depth	Depth to	Static Water Level					ļ				
PVI	80	35	5									
TYPE OF COME	PLETION: (Circ	_		H				ļ				
Gravel Packed	' Underrea	amed,	Telescoped,									
Natural Develor (Describe)	ment, C	Open Ho	le, Other		ļ		<u> </u>	 				
(Describe)							,	<u></u>				
WELL GROUT						<u> Keuel</u>	VEL)				
Type Grout (cire	de one): Cem	ent, Be	ntonite, or Mix									
L	SODEEN (~~~~		'		MAR n 3	2004					
Diameter - Inches	SCREEN [Slot Size - Inches	.			-					
Commeter - Inches	20	- 1	208			BY: OL	ME	2				
	<u> </u>				 	Parties in a delice street	UUB	<i>1</i>				
Screen Type	<u></u>		to Bottom - Feet		Top of La	p Pipe or Reduction in Casing						
<u> </u>	<u> </u>	<u> </u>	0-80			FFFT ONE SCREENLING						
						FEET ONE SCREEN: USE E	IACK PAGE					
T and fire that		- 4-:110	4 constructed		lot		lies	1.1.				
						ed in accordance with all						
					nvironna	ental Quality and/or the N	/1188188 1]	pp1				
Department	of Health reg	zulatioi	ns and state lav	vs.								
1												
: //	b - (11	- 60/			2-20-04						
. span	nus Mu	wo	of 86 and License No.		2-20-04 Date							
Signature of	Licensed Dr	iller ar	nd License No.		Date							
				_								
			Additional In	for	mation Re	equired On Back						

If well telescopes please sketch and show depths.										
sketch and snow depths.										
GROUND LEVEL]]			
						<u>.</u>				
1	, ,									
1						 				
Ì				1			j			
1		*	SEC	TION						
	SECTION Please indicate well location X.									
	Pump	Capacity (G	SPM)	No. of Stag	ges Setting i	Depth				
	PUMP	TEST					FT.			
	63 i	Well yielded GPM with								
l	a drawdown of ft.									
	afte	r			hour	s of pur	nping			
	LOG DATA TYPE OF LOG RUN (Circle One): No Log Run, Electric, Gamma Ray, Density, Sonic, Neutron, Other (Describe) Name of Organization Running Log									
	GEOLOGIC DATA (Office Use Only)									
		e Elev.		gic Unit	Unit Thickne		to Top			
	Subs.		Date		Analysis	Aquit	er Test			
	Driller i	's Remarks								
ŧ										
If more than one screen,										
show location of each on sketch.										