COUNTY WELL LOCATED	MIS	SISSIP	PI D	EPARTM	IENT OF	ENVII	RONME	NTAL		
WELL NUMBER CODED	PERMIT NUMBER			Office o	fiand a	ind Wat		ALITY		
6241	NAME OF DRILLING FIRM			55						
P-2043	Mid-South Dr	allino	<u>. </u>		Jacks		O. Box 39289			
10-31-01	Co. Inc.)	WA	TER W	ELL DF	RILLERS	S LOG		
NAME & MAILING ADDRESS OF LAN				Р	UMP DA	ATA		······································		
<u> </u>	edel			PE (Circle C						
10552 Strong Rd. Aberdeen, MS 39730			Submersible. Turbine, Jet Flowing Well, Other (Describe)							
Latitude:	59 150			YPE (Circle Tractor,		0				
Landude:				scribe)	Diesel,	Gasol H/P	マノム	utane.		
WELL LOCATION. SEC	TOWNSHIP RANGE	<u> </u>		N OF FORMAT		UNTERED		то		
9	16 8 7 \mathred{S}	, , , , , , , , , , , , , , , , , , , ,		<u>ish gre</u>	zych	4	0	17		
DISTANCE DIRECTI		الط	 -	<u>clary</u>			17	40		
<u>8</u> Miles <u>5</u>	or Aberdeen	Sau	VY	11 6 10			70	125		
OTHER LANDMARK	·	Ch	111	w/san	d sta	paks	125	155		
			nd	17-1	V 540	eaks		178		
WELL PURPOSE: Home, Irrigation, Mi	unicipal, Industrial, Fish Pond, etc.	cla	ル		7		178	235		
WELL D	ATA	Sa	NC	R			235			
Well Depth Casing Diameter		co	α	se sa	nd		255	260		
261' 4"		cle	<u> </u>	\			260	201		
Type of Casing Hole Depth	Depth to Static Water Level	-		<u>5</u>	\					
PVC	1 75'	LCC	<u>ان (</u>	<u> a</u>	70	<u>`</u>				
TYPE OF COMPLETION: (Cir.										
Gravel Packed. Underro Natural Development, (Describe)	eamed, Telescoped, Open Hole, Other									
WELL GROUTED TO A DEF	THOF /O FEET	 								
Type Grout (circle one): Cer										
SCREEN	DATA	-								
Diameter - Inches Length - Feet	Slot Size - Inches	<u> </u>	R	FC'D N	AV 8	PS a				
Screen Type	Depth to Bottom - Feet	Top	o te	Pipe or Re	UV B	<u>/ / / </u>	101			
DIC.	261	·	/ Lap		IF TELESO	_				
				FEET	ONESCR	EEN: USE 8	ACK PAGE			
I certify that the well wa	s drilled constructed a	nd com	nlete	d in acco	rdance r	with all	annlica	blo		
Requirements of the Mis										
Department of Health re				Quu-		01 410 1		, P		
	-	: .						.		
Mar. ()	Bar				11	7 7	41	i		
Nuice .	18my				1-6	~> _	$\mathcal{U}I$	_ {		
Signature of Licensed D	riller and License No.					Date				

Additional Information Required On Back

If well telescopes please sketch and show depths.		e i i i i i i i i i i i i i i i i i i i								
GROUND LEVEL	PUMP Well a dr afte TYPE Elect Othe Name Surface Subs.:	Capacity (1 2 PTEST I yield awdov F EOFLO ric. G. r (Descr of Organiz GEOL(Elev.	ed	OG DA I (Circle Ray, C	well loca ges Settin	g Depth 21	GPM with ft. pumping lo Log Run, Neutron,			
ļ										
If more than one screen, show location of each on sketch.										