COUNTY WELL LOCATED		MIS	SSI	SSIPPI D	EPARTM	ENT OF	ENVI	RONME	ΕΝΤΑΙ		
WELL NUMBER CODED	PERMIT	PERMIT NUMBER				QUALITY Office of Land and Water Resources					
397		F DRILLING FIRM	<del></del>		Cinco.	I Lane un			•		
0-177	5		£	P. O. Box 1063 Jackson, MS 39289-063							
DATE WELL COMPLETED	Dri	MINATE	55	EAND	WA	Jackso TER WE	n, me LL DF	3 3928: RILLER!	3-0631 S LOC		
NAME & MAILING ADDRESS OF LANDOWNER				<del>/</del>	<u>,                                     </u>	UMP DA		<del>-,</del>			
KAYFORD C	REST	MAN		PUMP TY	PE (Circle C				<del></del>		
GINGER HUI CON DUMEN				Submersible? Turbine, Jet Flowing Well, Other (Describe) POWER TYPE (Circle One):							
Latitude:				Electric Tractor, Diesel, Gasoline, Butane,							
Longitude:			!	Other (Describe) H/P							
WELL LOCATION SEC	TOWNSHIP	P RANGE		DESCRIPTIO	N OF FORMAT	TIONS ENCOUP	VTERED	<del>                                     </del>	TO		
11-13	<u>F4</u>	(3)12-6 (5)		70	P DO	<u> </u>		0	10		
DISTANCE DIRECTI	ION	NEAREST TOWN	1	A Com	KC+	<~-0	<del></del>	10	40		
Miles	of	WHAFIELD		(_)/	rec v	20		<u> </u>	120		
OTHER LANDMARK				WAITE	£ 50-0	4 C/K	<del>4</del>	40	80		
WELL PURPOSE: Home, Irrigation, M	unicipal, Ind	ustrial, Fish Pond, etc.	,	11141	4C C)	ino		80	120		
	· · · · · · · · · · · · · · · · · · ·		1	<u></u>		117	<del></del>	0-	100		
WELL C Well Depth Casing Diameter		Casing Length (Ft.)	<i>i</i> [	10/4	MESAL	0_		120	147		
ICIA! Uc	(m)4	127							ř <u> </u>		
Type of Casing Hole Depth	Depth to	Static Water Lèves									
01/1 147	1		1	•							
TYPE OF COMPLETION: (Cir	rcle One o	r More):	+				H Company	<u></u>			
Gravel Packed,Underre	reamed,	Telescoped,	1	<del></del>		·UEII	/E		<del> </del>		
Natural Development, (Describe)	Open Hol	ole, Other	. <b>†</b>		ni	<u> </u>	ากกว		<del> </del>		
WELL GROUTED TO A DEF	OTH OF	(D) FEET	it		UI	بر کے ملت	<u> </u>		<del> </del>		
Type Grout (circle one); Cer			1		RY	/o ( )	W/	5	<del> </del>		
			' [		<del>- E-S ti</del>	- <del>V</del> =	₩ W E	<u></u>			
SCREEN Diameter - Inches   Length - Feet		Slot Size - Inches									
() ()		110710115									
Screen Type	Depth	to Bottom - Feet	ŀ	Top of Lar	Pine or Rec	duction in C	colna				
PVC		147		Top of Lap Pipe or Reduction in Casing  IF TELESCOPED OR MORE THAN							
		7-/	Į		FEET	ONE SCREE					
I certify that the well wa Requirements of the Mi Department of Health re	ssissippi	i Department of	f Eı	complete nvironme	ed in acco ental Qual	rdance wi ity and/or	th all the N	applica Aississij	ıble ppi		
110											
19/1/	4	0-1-015	/			10-1	- O.	1	,		
Signature of Licensed D	Vriller ar	od License No.				<i>10е ј</i> Г	Date		-		
Signature di Tricement 19	Timer an	m Picénse 140.				L	aic		1		

Additional Information Required On Back

If well telesc sketch and	copes please show depths.									
				z. 6						
				. ·						
GROUND LEVEL	ROUND LEVEL					\ \				
					<u> </u>					
					<u></u>	. <u></u> .L				
		SECTION A-15								
		Please indicate well location X.								
			Capacity (C	SPM) No. of S	Z.	Setting Dept	<b>`</b>	<b>-</b> T.		
		PUMP	TEST	į.	1 -	つ				
		Wel	l yielde	ed		<u> </u>	GPM w	/ith		
		a drawdown of						ft.		
		after hours of pumpir						ing		
				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.	Geologic Unit	Unit	Thickness	Depth to T	∞		
Ţ		Subs.	SWL.	Date	Anal	lysis	Aquifer Te	<b>s</b> t		
		Driller's Remarks								
· · · · · · · · · · · · · · · · · · ·								_		
						<del> </del>	<del></del>	— J		
If more than one s	creen							_		
If more than one screen, show location of each on sketch.										

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