COUNTY WELL LO		, <b>N</b>	uss	ISSIPPI D	EPARTMENT OF EN	VIRONME	ENTAL				
WELL NUMBER	20 CODED	PERMIT NUMBER			QUALITY Office of Land and Water Resources						
94	× /	AME OF DRULING FIRM	L	Stilling		P. O. Box	10631				
1-30-6	PLETED	reservices	1 /-	Talling	Jackson, I WATER WELL						
NAME & MAILING	ADDRESS OF LAN	DOWNER	$\overline{1}$		PUMP DATA	<del> </del>					
Charles Brewer				PUMP TY	PE (Circle One):						
Clare Chicago Dd				Submersible Turbine, Jet Flowing Well, Other (Describe)							
Latitude:				POWER T	YPE (Circle One): Tractor, Diesel, Ga	salina f s	lutana				
Longitude: Clava MS				Other (Describe) H/P							
WELL LOCATION.		TOWNSHIP RANGE	_	DESCRIPTIO	N OF FORMATIONS ENCOUNTER	ED FROM	то				
	23	787	M	TOP	.501]	0					
DISTANCE	DIRECTIO	ON NEAREST TOWN	7	$C^{l}L$	AY	<i></i>	6				
_3,	viles SE	_ or Claron	.	ZAM	DY CLAY	31	37				
OTHER LANDMARK				CLI	<del>49</del>	131	86				
				<u> </u>	1 10 1 V	161	193				
WELL PURPOSE	lome, Irrigation, Mu	inicipal, Industrial, Fish Pond, et	C.		r l	193	193				
***************************************			ِ لِ	5 A	M D	194	341				
Well Depth	WELL D.		,			177	974				
O/In	b. ]	(in.) Casing Length (Fi	"		W	<b>—</b>					
Type of Casing	Hole Depth	Depth to Static Water Level	-								
0.00	240	S T									
TYPE OF COM		cle One or More):	-								
TYPE OF COMPLETION: (Circle One or More):  Gravel Packed. Underreamed, Telescoped,					· · · · · · · · · · · · · · · · · · ·		1				
Matural Development, Open Hole, Other (Describe)					***************************************		<del>  </del>				
WELL OBOUT		7105 / 5	-		BEOFILE						
WELL GROUTED TO A DEPTH OF _/_ FEET   Type Grout (circle one): Cement, Bentonite, or Mix							1				
SCREEN DATA					FEB / 2002						
Diameter - Inches	Length - Feet	Slot Size - Inches	٦		EV. O.						
	10	.010	_] '		DI. OLWE	<b>3</b> 1	1				
Screen Type		Depth to Bottom - Feet		Top of Lag	Pipe or Reduction in Casin	g					
PUC	·	1240	ال		FEET IFTELESCOPED ONE SCREEN: US	OR MORE THA	N.				
	·										
					ed in accordance with						
				invironme	ental Quality and/or the	: Mississi	ppi				
Department	or Health re	gulations and state la	aws.								
	. DA	1 STA	MM		1 20	<b>5.5</b>	•				
$\frac{\mathcal{U}}{\mathbf{S}_{i}}$	WW IX. C		1-30-02								
Signature of Licensed Driller and License No.  Date											

Additional Information Required On Back

if well telescopes please sketch and show depths.	_									
OBOLINA	_									
GROUND LEVEL				X						
				<del></del>		-				
				<del></del>						
		SECTION <u>23</u> Please indicate well location X.								
	Pump (	apacity   2	(GPM)	No. of Sta	iges Sei	ting Der	oth	FT.		
	Well	yield	ied _		<del></del>		_ GPM	with		
	111			******************************	ho					
	LOG DATA  TYPE OF LOG RUN (Circle One): No Log Run Electric. Gamma Ray. Density. Sonic, Neutron, Other (Describe)									
	Name of Organization Running Log									
	G Surface	GEOLOGIC DATA (Office Use Only) Surface Elev. Geologic Unit Unit Thickness Depth to Top								
	Subs. St		Date		Analysis		Aquifer 1			
	Driller's Remarks									
			· · · · · · · · · · · · · · · · · · ·			·		_		
If more than one screen, show location of each on sketch.										