FORM 9-1642
(1-69)
WELL SCHEDULE
U. S. DEPT. OF THE INTERIOR
GEological Survey
WATER RESOURCES DIVISION

MASTER CARD
Record by: WTO
Source of data: BOWC
Date: 11/128
Map: 63

State: 2B8 County: Amite
Lat: 31°11’14” N Long: 091°05’23” W
Local well number: 2B-1096

Owner or name: JAKE TONEY
Owner or name: R. H. Glode
Ownership: County Fed Gov’t, City, Corp or Co, Private, State Agency, Water Dist
Use of water: Stock, Irrig, Unusual, Recharge, Reuse, Desal, Geo, Desal-other

WELL-DESCRIPTION CARD
Same as on master card: Depth well: 19.2 ft
Depth cased: 18.6 ft
Casing: PVC 3

Finish: porous gravel w. gravel w. horiz. open perf., screen, slotted, open hole,
Method: air bored, cable, dug, hyd. jetted, air reverse trencing, driven, drive

Date Drilled: 10/67
Pump intake setting: 9.6 ft

Driller: Fitzgerald
Lift: SHALLOW
Power: Diesel, elec

Alt. LSD: 4.2 ft
Water Level: 7.2 ft
Drawdown: 0.6 ft

QUALITY OF WATER DATA: Iron: ppm
Sulfate: ppm
Chloride: ppm
Hard: ppm

Sp. Conduct: K x 10^5
Temp: °F

Date sampled: N/A

Taste, color, etc.:
### Hydrogeologic Card

**Well No.** 825

**Latitude-longitude**

**Physiographic Province:**

**Drainage Basin:**

**Subbasin:**

**Topo of well site:** depression, stream channel, dunes, flat, hilltop, sink, swamp, offshore, pediment, hillside, terrace, undulating, valley flat

**Major Aquifer:**

- System: __________
- Series: __________
- Aquifer, formation, group: __________

**Lithology:**

**Length of well open to:**

**Origin:**

**Depth to top of:**

**Aquifer Thickness:** __________ ft

**Minor Aquifer:**

- System: __________
- Series: __________
- Aquifer, formation, group: __________

**Lithology:**

**Length of well open to:**

**Origin:**

**Depth to top of:**

**Aquifer Thickness:** __________ ft

**Interval Screened:**

**Depth to consolidated rock:** __________ ft

**Depth to basement:** __________ ft

**Surficial material:** __________

**Coefficient of Trans:** __________

**Coefficient of Storage:** __________

**Spec cap:** __________

**Number of geologic cards:** __________