FORM 9-1642 (1-68)
WELL SCHEDULE
U.S. DEPT. OF THE INTERIOR
GEOLOGICAL SURVEY
WATER RESOURCES DIVISION

MASTER CARD
Record by: [Name]
Date of data: 7-25-74
County: [County]
Longitude: 91° 30' 12" W
Latitude: 33° 40' 00" N
Sequential number: 7

State: [State]
Lis. Min. Sec. Sec. T. Sec. SW.
Local number: [Number]
Local use: [Use]
Owner or name: [Name]
Address: [Address]
Ownership: [Ownership]
Use of well: [Use]
Data available: [Data]
Hyd. lab. data: [Data]
Qual. water data: [Data]
Freq. sampling: [Frequency]
Pump intake setting: [Setting]
Driller: [Driller]
Lift: [Lift]
Power: [Power]
Descrip.: [Description]
Alt. LSG: [Altitude]
Water level: [Water Level]
Date: [Date]
Drawdown: [Drawdown]
Quality of water:
Water data:
Sp. Conduct: [Specific Conduct]
Taste, color, etc.: [Taste]

U.S. G.P.O. 1972/729-793/96/1303