

WELL SCHEDULE

U. S. DEPT. OF THE INTERIOR GEOLOGICAL SURVEY WATER RESOURCES DIVISION

MASTER CARD

Record by JIS Source of data Bowc Date 3/70 Map _____

State 100 218 County (or town) Marion 46

Latitude: 31 12 5N Longitude: 089 55 45 Sequential number: 1

Lat-long accuracy: 5 23 13 31 12 degrees 15 min sec 18

Local well number: F009 3103 N13E Other number: _____ B & M

Local use: 038 Owner or name: _____

Owner or name: C. B. SMITH Address: Rt 2, Foxworth

Ownership: County, Fed Gov't, City, Corp or Co, Private, State Agency, Water Dist P

Use of Air cond, Bottling, Comm, Dewater, Power, Fire, Dom, Irr, Med, Ind, P S, Rec, water: _____

Use of well: Anode, Drain, Seismic, Heat Res, Obs, Oil-gas, Recharge, Test, Unused, Withdraw, Waste, Destroyed. W

DATA AVAILABLE: Well data Freq. W/L meas.: None Field aquifer char.

Hyd. lab. data: _____

Qual. water data; type: _____

Freq. sampling: _____ Pumpage inventory: yes no; period: _____

Aperture cards: _____

Log data: D

WELL-DESCRIPTION CARD

SAME AS ON MASTER CARD Depth well: 232 Meas. rept accuracy 3

Depth cased (first perf.): 222 Casing type: P1 Diam. in 4

Finish: porous concrete, gravel w. (perf.), gravel w. (screen), horiz. gallery, end, open end, other S

Method Drilled: A B C D H J P R T V W X Z H

Date Drilled: 970 Pump intake setting: _____ ft _____

Driller: _____ name _____ address _____

Lift (type): air, bucket, cent, jet, multiple (cent.), multiple (turb.), none, piston, rot, submerg, turb, other Deep Shallow

Power (type): diesel, elec gas, gasoline, hand, gas, wind; H.P. 1 Trans. or meter no. S

Descrip. MP _____ ft above _____ ft below LSD, Alt. MP _____

Alt. LSD: _____ Accuracy: (source) _____

Water Level _____ ft above _____ ft below MP; Ft below LSD _____ Accuracy: _____

Date meas: _____ Yield: _____ gpm _____ Method determined _____

Drawdown: _____ ft _____ Accuracy: _____ Pumping period _____ hrs _____

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

Sp. Conduct _____ K x 10⁶ _____ Temp. _____ °F Date sampled _____

Taste, color, etc. _____

TRANSMITTED FOR ADP

Well No. F 9

