State Well Report			
County: Amite	l .	art 1	For Office Use Only:
		t of Environmental Quality	Aquifer:
Permit #:	* · · · · · · · · · · · · · · · · · · ·	nd Water Resources Sox 10631	Well #: R- 1/0
Driller: Gary Rayborn		IS 39289-0631	L. S. Elevation:
Date drilling completed: 101006	(601)	961-5210	i
-	(601)354	4-6938 (fax)	E-log #:
State Law requires that this rep 30 days of completion of drilling	ort be prepared by the	driller in detail and filed w	ith the Department within
Well Owner Informa	ation	Well	Location
Owner Name Bob Gardne		Latitude:°,'	_" Longitude:"
Mailing Address: P.O.Box 10	<u>)9 </u>	Method of Lat/Long (circle or	ne): Conventional Survey,
		USGS quad, Hand-held	GPS, Survey-grade GPS
Ethel LA		1414 Sec	Twn N Rng 3E
City	ate Zip Code	Distance Direction	Nearest Town
Telephone No. (225 683 - 6"	744	Miles	of Centreville
Well Data			
Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other:			
Purpose of Well (circle one) Home	dustrial Tublic Suppry	Inigation Tibil Culture	diala.
Date well drilling started: 101006 Date well drilling completed: 101006			
If flowing, method of flow regulation: Valve Other (describe)			
Static Water Level: 60 feet above of below circle one) land surface Date measured: 10 10 06			
Method of Measurement (circle one) steel tape electric tape air line other:			
Hole depth: 215' Well grouted to a depth of 10 feet			
Type of grout (circle one): Cement Bentonite Mix			
Casing length: 195 feet Casing diameter: 4" inches Type of casing: PVC			
Screen length: 20 feet Screen diameter: 4" inches Type of screen: PVC			
Screen slot size: . O 10 inches Setting depth: From 195 feet to 215 feet			
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development			
Other (describe):			
Top of lap pipe or reduction in casing:feet. If telescoped or more than one screen, describe on back of page			
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:			
Name of organization running log(s): I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi			
I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi			
Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.			
RAYBORN DRILLING, INC.			

Print Name of Water Well Contractor and License No.

Signature of Water Well Contractor

BECEINET

and the second of the second

Ç.

All of the first the first

R.70

Ground Level		
		

Redelay gravel 0 80 HARD CHalk 80 160 Med Sand 160 215	Description of Formations Encountered	From	10
		- 1	
	Padala , amial	^	20
	receiay gravei		
	<u>, , , , , , , , , , , , , , , , , , , </u>		1
	HARD CHAIK	80	160
Med Sand 160 215			
	Mad Sand	160	510
	men sund	160	-12
			1
			
			-
			ļ
			
			
			<u> </u>
	Andreas - Control of the Control of		
			+
			
			1
		- 1	

If more than one screen, show location of each on sketch

Sketch the property layout and include the following: 1) the well location; 2) any permanent structures on the property that may aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and the well; 4) indicate direction.

Centreville
Hay 24

Lower centreville Rol

Dominique Rol

1.6 M Grave (Drive way

Well

Landowner Name: Bob Gardner

Signature of Water Well Contractor

RECEIVED

NOV 1 1 2006

BY: OLWR

	en e	na na kaominina dia kaomin Ny INSEE dia kaominina dia		gave tea
	And the condition is a second of the condition of the con	and the second s	in the first of the second of	
The Committee of State of the Committee of	an gerian pamman siya s	. O STORM STORMS ON DO A HONE THE PASSES.	to Myra - Mityger Carlo	
the state of the second of the second of				•
			الهجران فالمستخصص المستحدث والمشتران	
	A Reserved	Andrew Control	Alexander of the second of the	
	4			
en e		The second of th		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Andrew Education	tinhi.	er en	
and the second of the second o	on the growing is a construction of the first	The state of the s	inger var en skriver i de skriv	2 · *
en e				
		e merce		
and the second s				
	ranga Kanatan	en e	and the second of the second o	
en de la caracteria de la				***
Miles T. J. Land 1988 Co	est adad Me		The state of the s	
The second secon	\$98,777.75	·严重的数据的第三人称单数	2.8.3.MARHH	
en general en	e grande en en la la companya de la La companya de la co	the section of the se		•

STATE WELL REPORT

Part 2

County: Amite Permit #: Driller: Gary Rayborn Date completed: 101006

Pump Installer's Completion Report
Mississippi Department of Environmental Quality
Office of Land and Water Resources P.O. Box 10631 Jackson, MS 39289-0631

(601)961-5210 (601)354-6938 (fax)

For Office Use Only:		
Aquifer:		
Well #: R • 20		
Elevation:		

This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the
inctallation of nump

This report should be prepared by the pump installer in detainstallation of pump.	l and filed with the Department within 30 days of the	
Well Owner Information	Well Location	
Owner Name: Bob Gardner	Latitude: Longitude:	
Mailing Address: P.O.Box 109	Method of Lat/Long (circle one): Conventional Survey,	
	USGS quad, Hand-held GPS, Survey-grade GPS	
Ethel, LA 70730	1414 Sec Twn Rng	
City State Zip Code	Distance Direction Nearest Town	
Telephone No. (225) 883 - 6744	_ G Miles W of Centreville	
Pump Type Circle one	Power Type Circle one	
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas	
Bucket Piston Turbine	Electric Motor Hand Tractor PTO	
Centrifugal Rotary Flowing Well	Windmill Other (specify):	
Other (specify):	Horse Power Rating of Motor:	
Date Pump Installed: 101006	Setting Depth:feet	
Rated Pump Capacity:Gallons Per Minute	Number of Stages:	
Pump Test Data	Method of Measuring Water Level Circle one	
Date Well Tested: 10106		
Static Water Level (A):Feet Below Land Surface	Air Line Electric Measuring Line Steel Tape	
Pumping Water Level (B):Feet Below Land Surface	Other (specify):	
Drawdown [(B) - (A)]:Feet Below Land Surface	For flowing well, measured shut in head:feet	
Test Pumping Rate:Gallons Per Minute	Well yieldedGPM with a drawdown of	
Duration of Pump Test (minimum 4 hours):hours	feet afterhours of pumping	
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.		
Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer RECEIVED	

NOV 1 4 2006 BY: OLWR