	State Well Report	To 0.00 VI 0.1	
County Copiah County	Part 1	For Office Use Only:	
Missis	sippi Department of Environmental Quality	Aquifer:	
Permit #:	Office of Land and Water Resources	Well #:	
Driller: Gary Rayborn	P.O. Box 10631 Jackson, MS 39289-0631		
Date drilling completed: 8-15-06	(601)961-5210	L. S. Elevation:	
Date diffining completed.	(601)354-6938 (fax)	E-log #:	
State Law requires that this report be p 30 days of completion of drilling of the Well Owner Information	prepared by the driller in detail and filed well.	with the Department within	
		» T	
Owner Name Sam Perino	Latitude:,	, Longitude:,,	
Mailing Address: Barlow Rd	Method of Lat/Long (circle of	one): Conventional Survey,	
	USGS quad, Hand-hel	d GPS, Survey-grade GPS 7E	
Hazlehurst MS		Twn_ION_Rng_360	
City State	Zin Code		
Telephone No. (504) 481 - 7221	Distance Direction Miles	of Hazlehurst	
	Well Data		
1		Other	
Purpose of Well (circle one) Home Industrial	Public Supply Irrigation Fish Culture	Other:	
Date well drilling started: 81506	Date well drilling completed:	8115106	
If flowing, method of flow regulation: Valve Other (describe)			
Static Water Level: <u>68</u> feet above or	below (circle one) land surface Date measured	. 81 106	
Method of Measurement (circle one) steel tape			
Hole depth: 262 Well depth:	Well grouted to a depth of	feet	
Type of grout (offers off).	tonite Mix		
Casing length: 242 feet Casing diam			
Screen length: 20 feet Screen diam	neter:inches Type of screen:	PVC	
Screen slot size:inches	ting depth: From 242 feet to	262 feet	
Type of completion (circle all applicable): Grave	el packed Underreamed Telescoped Ope	en hole Natural Development	
Othe	er (describe):		
Top of lap pipe or reduction in casing:	feet. If telescoped or more than one se	creen, describe on back of page	
Logs run (circle all applicable): No log run Elec	ctric Gamma Ray Density Sonic Neutron	Other:	
Name of organization running log(s):		Is a service manufact of the Missississis	
I certify that the well was drilled, constructed,			
Department of Environmental Quality and/or t	the Mississippi Department of Health regulation	ns and state laws.	

0-60

RAYBORN DRILLING, INC.

Print Name of Water Well Contractor and License No.

Signature of Water Well Contractor
RECEIVED
SEP 1 3 2003

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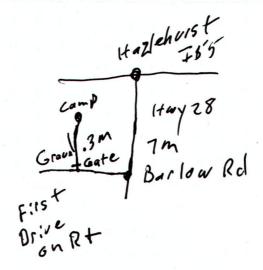
ATT THE THE THE PERSON OF THE

Ground Lev	/el		

From	10
0	20
20	210
210	26
	-
	0 20 40

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 propert aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property a	y that may nd the well;
4) indicate direction.	



andowner Name: Sam Perino

Signature of Water Well Contractor

SEP 13 2006 BY: OLWR

## STATE WELL REPORT

## Part 2

County: Copiah

Permit #: \_\_\_\_

Driller: Gary Rayborn

Date completed: 815106

Pump Installer's Completion Report
Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 10631

P.O. Box 10631 Jackson, MS 39289-0631 (601)961-5210 (601)354-6938 (fax)

For Office Use Only:	
Aquifer:	
Well #: _ <b>Q-</b> /5	
Elevation:	

	(601)35	4-6938 (fax)
This report should be prepared by the installation of pump.	e pump installer in detai	il and filed with the Department within 30 days of the
Well Owner Informati	on	Well Location
Owner Name: Sam Perino		Latitude:Longitude:
Mailing Address: Barlow Rd	1.	Method of Lat/Long (circle one): Conventional Survey,
Hazlehurst, 1	us 39n83	USGS quad, Hand-held GPS, Survey-grade GPS  14 14 Sec 29 Twn 10 N Rng 350 7E
City State	Zip Code	Distance Direction Nearest Town
Telephone No. (504) 481 - 722		1 Miles E of HazlehursT
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: 5HP
Date Pump Installed: 8 17 06		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:         8 17 06           Static Water Level (A):         68         Feet	Below Land Surface	Air Line Electric Measuring Line Steel Tape  Other (specify):
Pumping Water Level (B):Feet	Below Land Surface	Outer (opecity).
Drawdown [(B) – (A)]:Feet		For flowing well, measured shut in head:feet
Test Pumping Rate: Gallons Per Minute Well yielded GPM 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	f my knowledge.	
Gary Rayborn 0-60	~\_	RECEIVED
Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer	1 0 0000

SEP 1 3 2006

BY: OLWR