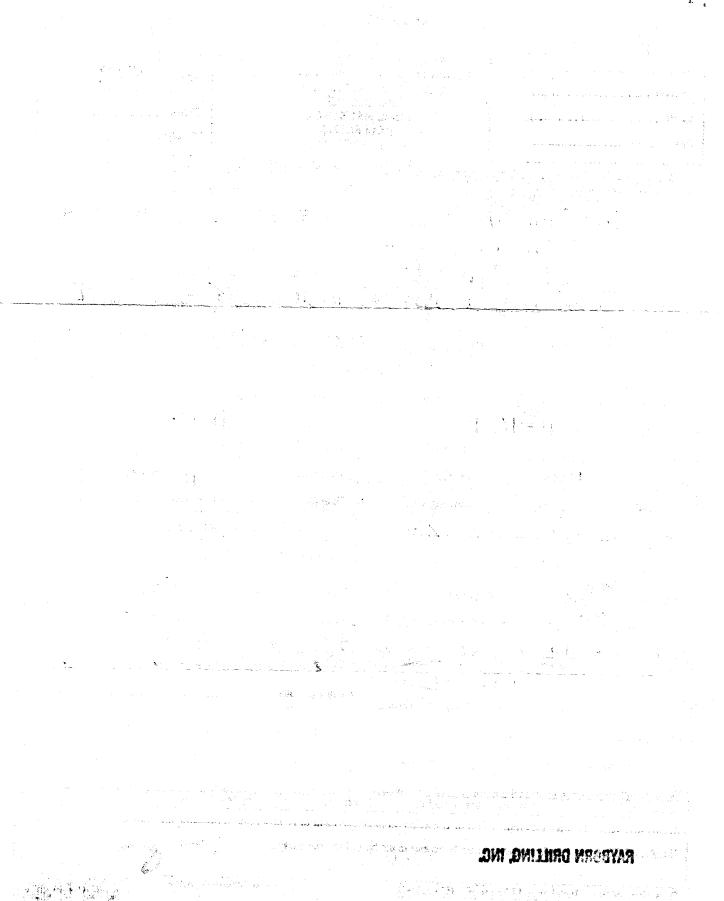
· · ·	State W	ell Report		
Franklin	· · · · · · · · · · · · · · · · · · ·		For Office Use Only:	
county: Franklin		of Environmental Quality	Aquifer:	
ermit #:	Office of Land an	nd Water Resources	Well #: F29	
		ox 10631		
Driller: Gary Rayborn		S 39289-0631	L. S. Elevation:	
Date drilling completed: <u>11-15-11</u>	(601)9	061-5210		
	(601)354	-6938 (fax)	E-log #:	
State Law requires that this rep	ort be prepared by the ort of the well	driller in detail and filed w	with the Department within	
30 days of completion of drilling Well Owner Inform	ation	Wel	l Location	
wher Name JACK Dale S		Latitude: <u>31 ° 30 ' 4 2</u>	L" Longitude: <u>91 • 08 · 34 "</u>	
Tailing Address: Sandy Creek		Method of Lat/Long (circle o		
8607 8.0	y press Pt	USGS quad; Hand-held	Hand-held GPS, Survey-grade GPS	
	Roy co, La 70809 1R4 18		Twn GN Rng IE	
City	ate Zip Code	Distance	O Nearest Town	
elephone No. (601) 660 - 2150		$\underline{3}_{\text{Miles}}$	0 of_ <u></u>	
	Well I	Data		
urpose of Well (circle one) (Home) In	dustrial Public Supply	Irrigation Fish Culture	Other:	
Date well drilling started:				
f flowing, method of flow regulation: V	alve Other (d	iescribe)		
Static Water Level:feet a	above or below (circle one)	land surface Date measured		
Method of Measurement (circle one)	steel tape electric tape) air line other:		
Hole depth: <u>400</u> Well d	lepth: 400'	_ Well grouted to a depth of	feet	
Type of grout (circle one): Cement				
Casing length: <u>380</u> feet Ca		inches Type of casing:	PVC	
m .	reen diameter:	inches Type of screen:		
Screen slot size: • 010 inches	Setting depth: From	<u>380</u> feet to	400 feet	
Type of completion (circle all applicable	Gravel packed Unde	rreamed Telescoped Ope	en hole Natural Development	
		<u></u>		
Top of lap pipe or reduction in casing:				
Logs run (circle all applicable): No log	run Electric Gamma Ray	y Density Sonic Neutron	Other:	
Name of organization running log(s):				
Name of organization running log(s): I certify that the well was drilled, cons	structed, and completed in	accordance with all applicable	le requirements of the Mississippi	
Department of Environmental Quality	and/or the Mississippi De	partment of Health regulatio	ns and state laws.	
RAYBORN DRILLING, IN	a 0-60)	- Y	
Print Name of Water Well Contractor a	nd License No.	Signature	of Water Well Contractor	
			4 BELORIEN	
μ.			DEC 0 7 20	
· · · ·		·	BA-UIW	



en de la presidencia. La presidencia

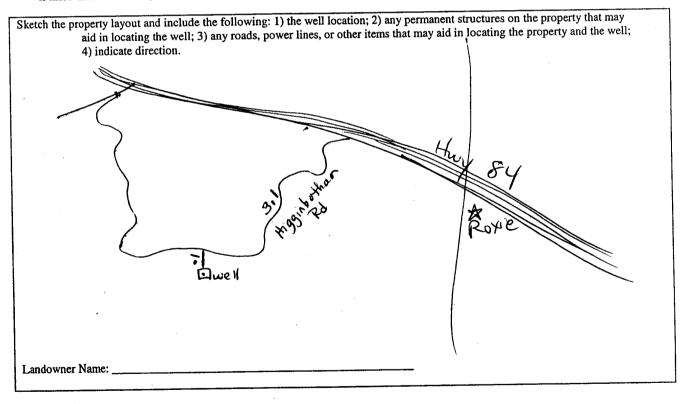
1 2 M . . .

If well telescopes please sketch below and show depths.

Ground Level

Description of Formations Encountered	From	To
Clay	0	335
Fine SAND	335	350
Med SAND	350	400
		<u> </u>
		+
		<u> </u>
		+
		+
······································		

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



Signature of Water Well Contra

RECEIVED DEC 0 7 2011 BY: OLWIR

F29

STATE WE	LL REPORT		
County:FranklinPermit #:Permit #:Driller:Gary RaybornDate completed:I-15-2011Gary Rayborn(601)354	For Office Use Only: Completion Report to f Environmental Quality nd Water Resources tox 10631 S 39289-0631 961-5210 4-6938 (fax)		
This report should be prepared by the pump installer in detai installation of pump.	Well Location		
Well Owner Information (1)	Latitude:Longitude:		
Owner Name: Jack Dale Shaffer			
Mailing Address: Sandy Crk Rod 9 Gun Club	Method of Lat/Long (circle one): Conventional Survey,		
<u>8607 E. Cypress Pt.</u> Baton Rouge La 20809 City State Zip Code	USGS quad, Hand-held GPS, Survey-grade GPS 1414 SecTwn_6N Rng_IE Distance Direction Nearest Town		
Telephone No. (601) 660-2158	<u>3</u> Miles W of Roxie		
Denne (Denne)	Power Type		
Pump Type Circle one	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:	Setting Depth:		
Rated Pump Capacity:Gallons Per Minute	Number of Stages: 14		
Pump Test Data	Method of Measuring Water Level Circle one		
Date Well Tested:	Air Line Electric Measuring Line Steel Tape		
Static Water Level (A): Feet Below Land Surface	Other (specify):		
Pumping Water Level (B):Feet Below Land Surface			
Drawdown [(B) – (A)]:Feet Below Land Surface	For flowing well, measured shut in head:feet		
Test Pumping Rate:	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 Gary Rayborn 0-60	of my knowledge.		
Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installe		
	HELVEL BULLE		
• · · · · · · · · · · · · · · · · · · ·	DEC-0 7 2011		
	BA: UTWE		