	1	206	2.相	翻
	of 2 on 1 WALKER	22-	293	, u H
1st	MALKER		10.	
	VV''			

State Well Report	For Office Use Only:
Part 1	1 1
County: Teff Davis Part 1  Mississippi Department of Environmental Quality	Aquifer: 126
Office of Land and Water Resources	Well #:
Driller: Gary Rayborn Jackson, MS 39289-0631	L. S. Elevation:
$9.11_{-10}$ (601)961-5210	E-log #:
State Law requires that this report be prepared by the driller in detail and filed	with the Department within
30 days of completion of drilling of the well.	ll Location
Name Penn-Va Oil & Gas Corp Latitude: 51 . 43 . S.C.	2" Longitude: 89 . 63, 34 "
Method of Lat/Long (circle	one): Conventional Survey,
$\Delta D = \Delta D = \Delta D = 1$ USGS quad; Hand-ne	ld GPS, Survey-grade GPS
Houston TX 77024 SE 4NE 4 Sec 3.	2 Twn 9 N Rng 19W
Telephone No. 423 723 - 0281  Distance Direction No. 423 723 - 0281	Nearest Town of Prentiss
Telephone No. (10/2)	
Well Data	O to Speak
Process of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture	Other: Ria Supply
Purpose of Well (circle one) Home industrial	9-11-10
ligite Well (Itililia Stateway)	
If flowing, method of flow regulation: Valve Other (describe)	
If flowing, method of flow regulation.	ed: 9-11-10
Static Water Level:feet above on below (circle one) land surface Date measure	
steel tape (electric tape) air line other:	
Method of Measurement (	of <u>lO</u> feet
Hole depth:	
Type of grout (circle one): Cement Bentonite Mix    Mix   I   I   I   I   I   I   I   I   I	PVC
Casing length: 140 feet Casing diameter:inches Type of casin	PVC
2 O feet Screen diameter:inches Type of screen	n:
Screen left size: 4020inches Setting depth: From140feet_to	160 feet
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped C	Open hole Natural Development
Other (describe):	
The Language of the Control of the C	e screen, describe on back of page
Top of lap pipe or reduction in casing:feet. If telescoped or more than one	
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutro	on Other:
Name of organization running log(s):  I certify that the well was drilled, constructed, and completed in accordance with all applications of the statement of Health regular.	Mile Ledun ourons or are summer to
I certify that the well was drilled, constructed, and completed in accomplete in accom	itions and state laws.
	7
RAYBORN DRILLING, INC. $0-60$	
Print Name of Water Well Contractor and License No Signat	ture of Water Well Contractor
Print Name of Water Well Contractor and Exercise	OCT 9 5 2010

If well telescopes please sket	ch below and show depths.
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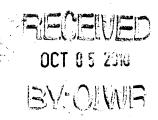
Ground Level	

Description of Formations Encountered	From	То
Red, SANDY CLAY	0	40
STREAKS OF SAND + CLAY	40	100
FINE SAND	100	120
PEA GRAVEL	120	160
•		
		1
	士	

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

If more than one screen, show location of every layout and include the following: 1) the well location; 2) any permanent structures on the property that may ketch the property layout and include the following: 1) the well location; 2) any permanent structures on the property that may ketch the property layout and include the following: 1) the well location; 2) any roads, power lines, or other items that may aid in locating the property and the well;	
ketch the property layout and include the following: 1) the well location; 2) any permanent structures on the property and the well; aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and the well;	1
4) indicate direction. Wallet 13-293411.	
OLD Red 1 (2.3 miles	
Sa No	
halker M	
. 00 <del>1</del>	
prentiss	
Landowner Name:	





## STATE WELL REPORT

Part 2

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

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

For Office Use Only:			
Aquifer:			
Well #:			
Elevation:			

Date completed:	(001)554-	W. L.	
J by	L be nump installer in detail	and filed with the Department within 30 da	ys of the
This report should be prepared by L	ne bomb moonee	Well Location	
installation of pump.  Well Owner Informs	ation	•••	
Owner Name: Penn-Va O	13 Gas(000 1	Latitude:Longitude:	
Owner Name: Penn-Vac	0:100		nol Curvey
Owner Name: 840 Gess Mailing Address: 840 Gess	sner Soite 000	Method of Lat/Long (circle one): Convention	
Mailing Address:	0-300	USGS quad, Hand-held GPS, S	urvey-grade GPS
DEPT A	1	0000 4	N = 19W
Houston T	× 77024	1414 Sec <u>22</u> Twn 9	Nng. 100
City State	T' Code	No amont 7	1
Chy		Distance Direction Nearest	15-6
Telephone No. (423) 723- (	つつをし	10 Miles N/NW of Pren	<u>†155</u>
Telephone No. (423)	10001		
		T-ma	
Pump Type		Power Type Circle one	
Circle one	•	Carlos and	
	Submersible	Diesel Engine Gasoline Engine	Natural Gas
Air Lift Jet	Submersione	Flectric Motor) Hand	Tractor PTO
Bucket Piston	Turbine	Electric Motor Hand	•
Bucket	Wall	Windmill Other (specify):	
Centrifugal Rotary	Flowing Well	51	4p
la de cisa.		Horse Power Rating of Motor:	
Other (specify):	10 :	Setting Depth: 147	feet
Date Pump Installed:	-10	Setting Depair.	
100	Gallons Per Minute	Number of Stages:	<del></del>
Rated Pump Capacity:			
		Method of Measuring Wa	iter Level
Pump Test D		Circle one	
Date Well Tested: 9-12-1	10	la de Vine	Steel Tape
Date Well Tested:		Air Line Electric Measuring Line	Sicol Tupo
Static Water Level (A): 100	Feet Below Land Surface	Other (specify):	
		Outer (speeds).	
Pumping Water Level (B):	Feet Below Land Surface	Latina in boods	feet
	Feet Below Land Surface	For flowing well, measured shut in head:	
Drawdown [(B) = (13)].	•	Well yielded GPM w	ith a drawdown of
Test Pumping Rate:	Gallons Per Minute		
	ours): hours	feet after	hours of pumping
Duration of Pump Test (minimum 4 h	Outo)		
		et of my knowledge.	
I HEREBY CERTIFY that the above	statements are true to the be	The state of the s	
1 Car Rayhorn	()- $(00)$		
Print Name of Pump Installer and Lie	ense No. (if applicable)	Signature of Pump Installer	PH TANKS
Print Name of Fully Instance and 22.		•	1 That the Whater