State W	ell Report	·	
<u>^</u>	Part 1	For Office Use Only:	
Mississippi Departmen	nt of Environmental Quality	Aquifer: G 28	
Permit #: Office of Land	and Water Resources	Well #:	
	Box 10631 MS 39289-0631	L. S. Elevation:	
)961-5210		
(601)35	54-6938 (fax)	E-log #:	
State Law requires that this report be prepared by the 30 days of completion of drilling of the well.	e driller in detail and filed v	vith the Department within	
Well Owner Information / Keuin		l Location	
wher Name Rusty Marks/ Wilson	Latitude: 31 • 44 . 5°	<u>1." Longitude: 91.11,24."</u>	
Tailing Address: 305 Creekbend Rd	Method of Lat/Long (circle o	ne): Conventional Survey,	
		d GPS, Survey-grade GPS	
Natchez MS 39120 City State Zip Code	1/4 1/4 Sec 32	$3 _{\text{Twn}} 9N _{\text{Rng}} / W$	
$\frac{\text{City}}{\text{Felephone No. }(60], 442-2620}$	$\underline{\underline{\text{Distance}}}_{\text{Miles}} \underline{\underline{\text{Direction}}}_{\text{W}}$	of <u>Fayette</u>	
	Data		
		Other:	
Purpose of Well (circle one) Home Industrial Public Supply	- 0		
-	e well drilling completed:		
If flowing, method of flow regulation: Valve Other	(describe)	119 09	
Static Water Level: <u>20</u> feet above or below circle one) land surface Date measured	<u> </u>	
Method of Measurement (circle one) steel tape electric tag			
Hole depth: 30 Well depth: 30		feet	
Type of grout (circle one): Cement Bentonite Mi			
Casing length: <u>20</u> feet Casing diameter: <u>4</u>	inches Type of casing:	ρνς	
Screen length: <u>10</u> feet Screen diameter: <u>4</u>	inches Type of screen:		
Screen slot size: 0,10 inches Setting depth: From	nfeet to	<u>30feet</u>	
	derreamed Telescoped Op	en hole Natural Development	
		creen, describe on back of page	
Logs run (circle all applicable): No log run Electric Gamma F			
			1
Name of organization running log(s): I certify that the well was drilled, constructed, and completed	in accordance with all annlicat	le requirements of the Mississippi	-
I certify that the well was drilled, constructed, and completed Department of Environmental Quality and/or the Mississippi	Department of Health regulatio	ons and state laws.	
	nohar amount of training roll-same		
RAYBORN DRILLING, INC. D-6	0		
Print Name of Water Well Contractor and License No.	Signatur	e of Water Well Contractor	
		0EC 0 2 1	2 n n
		BY: OL	.VV

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If well telescopes please sketch below and show depths.

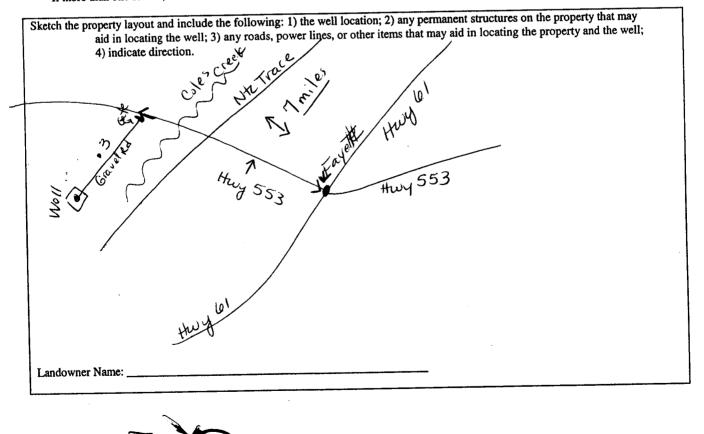


Description of Formations Encountered	From	To
 Chalk	0	20
Gravel and Sand	20	30
		-

678

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

Signature of Water Well Contractor



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Permit #: Driller: <u>Gary Raybor</u> Date completed: <u>11-9-09</u>	Part 2 Pump Installer's Completion Report lississippi 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: Z Z Well #:
installation of pump. Well Owner Information Dwner Name: Kevin Wilson / R Mailing Address: <u>305 Creekb</u> <u>Natchez US</u> City State Telephone No. (<u>601</u> , 442 - 2620	US+y Mark Latitude: end Rd Method of Lat/Long (circle one USGS quad, Hand 39120 1/4 Sec_3 Zip Code Distance Direction	Location Longitude: e): Conventional Survey, -held GPS, Survey-grade GPS <u>3</u> _Twn_ <u>9N_Rng_1W</u> Nearest Town
Bucket Piston To	ubmersible Diesel Engine Gasolir urbine Electric Motor Hand Howing Well Windmill Other Horse Power Rating of Motor Setting Depth: 29	ircle one ne Engine Natural Gas Tractor PTO (specify):
Pumping Water Level (B):Feet Bel Drawdown [(B) – (A)]:Feet Be	Air Line Electric Mer Air Line Electric Mer Other (specify): elow Land Surface For flowing well, measured s allons Per Minute Well yielded	easuring Water Level Circle one asuring Line Steel Tape hut in head:feet GPM with a drawdown of hours of pumping

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DEC.	N.	2	2009

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