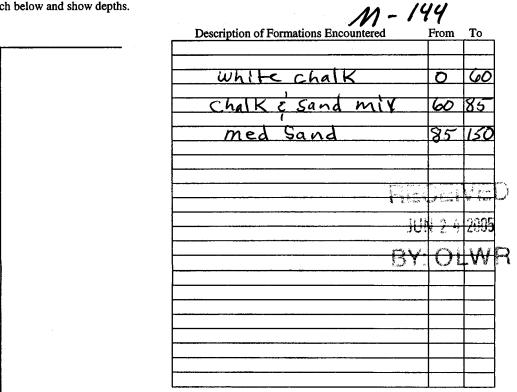
	State Well Report	For Office Use Only:	
County: Lamar	Part 1		
Permit #:	Mississippi Department of Environmental Qua Office of Land and Water Resources	lity Aquifer:	
Driller: Gary Rayborn	P.O. Box 10631		
Date drilling completed: _ & 9 05	Jackson, MS 39289-0631 (601)961-5210	L. S. Elevation:	
	(601)354-6938 (fax)		
State Law requires that this rep	ort be prepared by the driller in detail and fi	led with the Department within	
30 days of completion of drilling Well Owner Inform	of the weat	Well Location	
DEDTE		" Longitude:'"	
PO B.		rcle one): Conventional Survey,	
Mailing Address: T.U.DOX			
		USGS quad; Hand-held GPS, Survey-grade GPS	
Ferriday 1 City St	ate Zin Code		
Telephone No. (318) 757 - 3	Dista	of 15after ville	
	Well Data		
D. CWALL(-instrance) Mome. In	dustrial Public Supply Irrigation Fish Cult	ure Other:) Rig Supply	
Purpose of Well (circle one) Home In			
	Date well drilling completed:		
If flowing, method of flow regulation: Va	alve Other (describe)		
Static Water Level: <u>93</u> feet a	bove or below circle one) land surface Date meas	sured: 6905	
Method of Measurement (circle one)	steel tape electric tape air line other:		
Hole depth: 150 Well d	epth: <u>150</u> Well grouted to a dep	th offeet	
Type of grout (circle one): Cement	Bentonite Mix		
Casing length: 130 feet Cas	ing diameter: <u>4</u> ¹¹ inches Type of cas	sing: <u>PVC</u>	
	reen diameter: inches Type of scr	een: <u>PVC</u>	
Screen slot size: <u></u>			
	Gravel packed Underreamed Telescoped	Open hole Natural Development	
	Other (describe):		
Top of lap pipe or reduction in casing:	feet If telescoped or more than o	one screen, describe on back of page	
Logs run (circle all applicable). No log r	un Electric Gamma Ray Density Sonic Neu	tron Other:	
Name of organization running log(s):		· · · · · · · · · · · · · · · · · · ·	
	tructed, and completed in accordance with all appl		
Department of Environmental Quality	and/or the Mississippi Department of Health regu	IAUUAS AIU SIAW IAWS.	

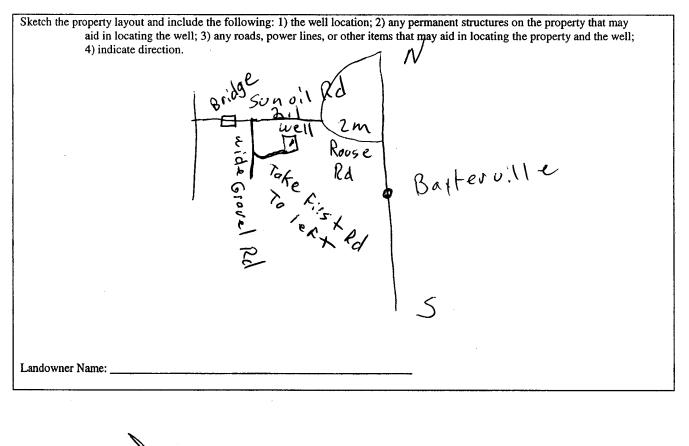
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If well telescopes please sketch below and show depths.





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



Signature of Water Web Contractor

	STATE WI	ELL REPORT	
County: Lamar	Part 2 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:
Driller: Gary Rayborn Date completed: 69105			Well #: <u>M - 144</u> Elevation:
This report should be prepared by the installation of nump.			ent within 30 days of the
moundation of pumpt			Il Location
Well Owner Information Owner Name: <u>DEDDrilling</u> Mailing Address: P.O. Box 1634		Latitude:	DYC O
		Method of Lat/Long (circle one): Conventional Survey,	
·		USGS quad, Han	d-held GPS, Survey-grade GPS
Ferriday LA 71334		<u>14</u> <u>14 Sec 5</u> Twn <u>IN</u> Rng <u>16</u> W	
City State	Zip Code	Distance Direction	Nearest Town
Telephone No. (318) 3 57-3	274	<u>4</u> Miles <u>W</u>	of Bayterville
Pump Type Circle one	· · · · · · · · · · · · · · · · · · ·		ower Type Dircle one
Air Lift Jet (Submersible		ne 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	r: <u>5</u>
Date Pump Installed: 6905		Setting Depth: 12	(cfeet
Rated Pump Capacity:	_Gallons Per Minute	Number of Stages:	3
Pump Test Data		Method of Measuring Water Level Circle one	
Date Well Tested: 6905			
Static Water Level (A): <u>93</u> Feet Below Land Surface			asuring Line) Steel Tape
Pumping Water Level (B):Feet	Below Land Surface	Other (specify):	
Drawdown [(B) - (A)]:Fee	Below Land Surface	For flowing well, measured s	hut in head:feet
Test Pumping Rate: Gallons Per Minute		Well yieldedGPM with a drawdown of	
Duration of Pump Test (minimum 4 hours)	:hours	feet after _	hours of pumping
I HEREBY CERTIFY that the above stater	nante ara true to the best	1	
	inortio are and to the pest (I MY KHOWICUKC.	
Rayborn Drilling Inc	O_{-1-0}		