	State W	ell Report	Ear Office Hee Only		
County: Lamar	Part 1		For Office Use Only:		
•	Mississippi Department of Environmental Quality		Aquifer:		
Permit #:	Office of Land and Water Resources P.O. Box 10631		Well #: M-1100		
Driller: Gary Rayborn		S 39289-0631	L. S. Elevation:		
Date drilling completed: 2-16-06	1	961-5210	İ		
	[601)354	l-6938 (fax)	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.					
Well Owner Informa	ation	Well	Location		
Owner Name P+D Drill	ing. Inc	Latitude:'	" Longitude:'"		
Mailing Address: P.O.Box	1dress: P-0, Box 1634		Method of Lat/Long (circle one): Conventional Survey,		
USGS quad; Hand-held GP			I GPS, Survey-grade GPS		
Ferriday LA 71334 City State Zip Code		1414 Sec_9	Twn N Rng 16W		
City State Zip Code Telephone No. (3/8) 757 - 3274 Distance 3 Miles		Distance Direction 3 Miles 5 W	of Bax erville		
	Well I	Data			
Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other Ria Supply					
Date well drilling started: 2-16-06 Date well drilling completed: 2-16-06					
If flowing, method of flow regulation: Valve Other (describe)					
Static Water Level: 75feet above or below circle one) land surface Date measured: 2-16-06					
Method of Measurement (circle one)	steel tape electric tape	air line other:			
Hole depth: 160' Well depth: 160' Well grouted to a depth of 10 feet					
Type of grout (circle one): Cement	Bentonite Mix				
Casing length: 140 feet Cas	Casing length: 140 feet Casing diameter: 4" inches Type of casing: PVC				
Screen length: 20 feet Screen diameter: 4" inches Type of screen: PVC					
Screen slot size: 1020 inches Setting depth: From 140 feet to 160 feet					
Type of completion (circle all applicable) Gravel packed Underreamed Telescoped Open hole Natural Development					
Other (describe):					
Top of lap pipe or reduction in casing:feet If telescoped or more than one screen, describe on back of page					
Logs run (circle all applicable) No log run Electric Gamma Ray Density Sonic Neutron Other:					
Name of organization running log(s):		1 241 W 12 11 11	no quirements of the Mississinni		
I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi					
Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.					

Print Name of Water Well Contractor and License No.

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Signature of Water Well Contractor

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If well telescopes	nlease	sketch	below	and	show	depths
II WELL LEICSCODES	DICASC	PVCCCII	OCTO M	uii	0110 11	

M-1100

Ground Level		

Description of Formations Encountered	From	То
Sand	10	3
Clay	_\5_	20
Clay Sand Eclay Streaks Sand Coarse Clay med Sand	20	60
Sand Coarse	60	95
Clay	95	125
med Sand	125	160
		1
		<u> </u>
		1
		
		-
		+
		+
		+
		

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 property that may aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and the well; 4) indicate direction.
lacksquare
1+ay 13
Gulf comp Pall Bayterville
Balter
2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 /
3
Landowner Name:

Signature of Water Well Contractor

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STATE WELL REPORT

Part 2

County: Lamar **Pump Installer's Completion Report** Mississippi Department of Environmental Quality Permit #: Office of Land and Water Resources P.O. Box 10631

For Office Use Only:		
Aquifer:		
Well #: M - \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
Elevation:		

Driller: Gary Kayborn Date completed: 2-16-06	Jackson, M (601)	MS 39289-0631 Well #: M - \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
This report should be prepared by the pump installer in detail and filed with the Department within 30 days of the				
installation of pump. Well Owner Information	nn -	Well Location		
<u></u>				
Owner Name: D+DDril		Latitude:Longitude:		
Mailing Address: P.O. Box 1634		Method of Lat/Long (circle one): Conventional Survey,		
		USGS quad, Hand-held GPS, Survey-grade GPS		
Ferriday LA City State	713 3 4 Zip Code	1414 Sec_ 9 Twn JN Rng 16 W		
,	•	Distance Direction Nearest Town		
Telephone No. (318) 757 - 3274		3 Miles SW of Barterville		
Ритр Туре		Power 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: 5 #P		
Date Pump Installed: 2-16-06		Setting Depth: 105 feet		
Rated Pump Capacity:	Gallons Per Minute	Number of Stages: 14		
Pump Test Data		Method of Measuring Water Level		
Date Well Tested: Z-16-0	6	Circle one		
		Air Line Electric Measuring Line Steel Tape		
Static Water Level (A): 75 Feet I	Below Land Surface	Other (specify):		
Pumping Water Level (B):Feet B	selow Land Surface			
Drawdown [(B) – (A)]:Feet I	Below Land Surface	For flowing well, measured shut in head:feet		
Test Pumping Rate: Gallons Per Minute		Well yieldedGPM 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 my knowledge. Cary Raybor 0-60 Print Name of Pump Installer and License No. (if applicable) Signature of Pump Installer				

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BY: OLWR