	C4-4- 117	all Danant					
	State Well Report Part 1 Mississippi Department of Environmental Quality		For Office Use Only:				
County: Lamar			Aquifer:				
Permit #:	Office of Land a	nd Water Resources	Well #: <u>M-164</u>				
Driller: Gary Rayborn		ox 10631 S 39289-0631	L. S. Elevation:				
Date drilling completed: 4-22-06	(601)9	961-5210					
	(601)354-6938 (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 Information		Well Location					
Owner Name D+D Drilling Inc		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 71334 City State Zip Code		<u>14 Sec_21</u> Twn <u>IN</u> Rng <u>16</u> W					
City State Zip Code Telephone No. (318) 757 - 3274		Distance Direction Nearest Town <u>H</u> Miles <u>SE</u> of <u>Baxterville</u>					
	Well I	L Data					
Purpose of Well (circle one) Home Ind Date well drilling started: <u>4-21-0</u> If flowing, method of flow regulation: Va Static Water Level: <u>60</u> feet all	6 Date Date	well drilling completed:	·				
		air line other:					
Hole depth: <u>200'</u> Well depth: <u>200'</u> Well grouted to a depth of <u>10</u> feet							
Type of grout (circle one): Cement	Bentonite Mix						
Casing length: 180 feet Casi	ng diameter: <u>4"</u>	inches Type of casing:	PVC				
Casing length: icet Casing diameter: inches Type of screen: PVC Screen length: icet Screen diameter: inches Type of screen: PVC							
Screen slot size: 1020 inches Setting depth: From 180 feet to 200 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 t	elescoped or more than one so	creen, 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):							
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.							
Rayborn Drilling I	nc. 0-60						
Print Name of Water Well Contractor and		Signature	of Water Well Contractor				

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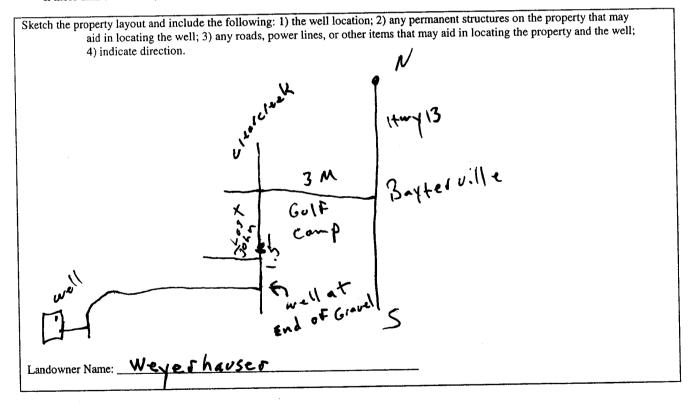
If well telescopes please sketch below and show depths.

Ground Level

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Description of Formations Encountered	From	To
 Clay	-10	60
Fine Sand	60	160
Med SAND	160	200
		-

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



Signature of Water Well Contractor

M-164

County: <u>Lamar</u> Permit #: Driller: <u>Gary Rayborn</u> Date completed: <u>4-22-06</u>	STATE WELL REPORT 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: Well #: <u>M - 164</u> Elevation:				
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 Inform	nation	Well Location					
Owner Name: D+D Dri	lling Inc	Latitude: Longitude:					
Mailing Address: P.0, Box	1634	Method of Lat/Long (circle one): Conventional Survey,					
		USGS quad, Hand-held GPS, Survey-grade GPS					
Ferriday L City Stat	H [15]3 te Zip Code	1414 Sec_ 21 Twn <u>1 N</u> Rng 16W					
		Distance Direction	Nearest Town				
Telephone No. (318) 757 - 3274		<u>4</u> Miles <u>SE</u> o	Baxterville				
			· · · · · · · · · · · · · · · · · · ·				
Pump Type Circle one			wer Type ircle one				
Air Lift Jet	Submersible	Diesel Engine Gasolir	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	<u>5HP</u>				
Date Pump Installed: 4-22-0	06	Setting Depth:feet					
Rated Pump Capacity:		Number of Stages:					
Pump Test Da	ta	Method of Measuring Water Level Circle one					
Date Well Tested: 4-22-0	06		· · · ·				
Static Water Level (A): 60 F	Veet Below Land Surface		suring Line Steel Tape				
Pumping Water Level (B):F	eet Below Land Surface	Other (specify):	······································				
Drawdown [(B) – (A)]:F	eet Below Land Surface	For flowing well, measured sh	nut in head:feet				
Test Pumping Rate:60	Gallons Per Minute	Well yielded 60	GPM with a drawdown of				
Duration of Pump Test (minimum 4 hou	rs):hours	feet after	hours of pumping				
I HEREBY CERTIFY that the above sta							

Print Name of Pump Installer and License No. (if applicable)

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Signature of Pump Installer

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