	State Well Report	For Office Use Only:		
. 10-00-	Part 1			
Mississippi	Department of Environmental Quality e of Land and Water Resources	Aquifer:		
	P.O. Box 10631	Well #: M-165		
	Jackson, MS 39289-0631	L. S. Elevation:		
Date drilling completed: 4-26-06	(601)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	We	ell Location		
Owner Name D+ D Drilling, In	Latitude:°'_	" Longitude:°"		
Mailing Address: P. O. Box 1634	Method of Lat/Long (circle	one): Conventional Survey,		
	USGS quad, Hand-he	ld GPS, Survey-grade GPS		
Ferriday LA 7133	34 1/4 Sec_1/1	Twn IN Rng 16W		
City State Zip Telephone No. (318) 757 – 3274	Distance Direction	of Baxerville		
Well Data				
Purpose of Well (circle one) Home Industrial Put	olic Supply Irrigation Fish Culture	Other) Ria Supply		
Date well drilling started: 4-25-66 Date well drilling completed: 4-26-06				
If flowing, method of flow regulation: Valve Other (describe)				
Static Water Level: 80 feet above or below (circle one) land surface Date measured: 4-26-06				
Method of Measurement (circle one) steel tape electric tape air line other:				
Hole depth: 180' Well depth: 180' Well grouted to a depth of 10 feet				
Type of grout (circle one): Cement Bentonite Mix				
Casing length: 160 feet Casing diameter:	inches Type of casing:			
Screen length: 20 feet Screen diameter: 4" inches Type of screen: PVC				
Screen slot size: O 26 inches Setting d	epth: From 160 feet to			
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): I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi				
I certify that the well was drilled, constructed, and completed in accordance with an applicable requirement of the wississippi. Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.				
Department of Environmental Quanty and/of the 14th Substitute of Acoust 10 general and 14th Substitute of Acoust 10 gen				
Rayborn Drilling Inc 0-60				
Print Name of Water Well Contractor and License No.		e of Water Well Contractor		

Ground Level	

Description of Formations Encountered	From	10
Description of Formations Encountered White Chalk Fine Sand Med Sand	0	80
Fine Sand	80	150
Med Sond	150	180
Med Sand		
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If more than one screen, show location of each on sketch

	Also associate that many
Sketch 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 i	iems that may aid in locating the property and the wen;
4) indicate direction.	1
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12 SE Gravel ka	
1/7	
Landowner Name: weyes hauses	

Signature of Water Well Contractor

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 County: ____ Permit #: _

For Office Use Only:		
Aquifer:		
Well#: M-165		
Elevation:		

Driller: Gary Nayborr Jackson, N	Jackson, MS 39289-0631 (601)961-5210 Well #:		
1 Date completed: \rightarrow 2000	4-6938 (fax) Elevation:		
This report should be prepared by the pump installer in deta installation of pump.	il and filed with the Department within 30 days of the		
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	1414 Sec_16 _Twn_1N_Rng_16W		
	Distance Direction Nearest Town		
Telephone No. (318) 757 - 3274	4 Miles SE of Baxterville		
Pump Type	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:		
Date Pump Installed: 4-26-06	Setting Depth:feet		
Rated Pump Capacity: 60 Gallons Per Minute	Number of Stages:		
Pump Test Data	Method of Measuring Water Level		
Date Well Tested: 4-26-06	Circle one		
Static Water Level (A): Feet Below Land Surface	Air Line Electric Measuring Line Steel Tape		
Pumping Water Level (B):Feet Below Land Surface	Other (specify):		
Drawdown [(B) – (A)]:Feet Below Land Surface	For flowing well, measured shut in head:feet		
Test Pumping Rate: Gallons Per Minute	Well yielded GPM with a drawdown of		
Duration of Pump Test (minimum 4 hours):hours	feet after hours of pumping		
nous in the second seco			
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.			
Gary Rayborn 0-60 Print Name of Pump Installer and License No. (if applicable) Signatured Pump Installer			
Print Name of Pump Installer and License No. (if applicable)	Signature At Pump Installer		