	STATE	WELL REPORT		٦	
County: Marion		Part 1	For Office Use Only:		
Permit #:	Driller's Log Mississippi Department of Environmental Quality		Well #: _ <u>070</u>		
oriller: Gary Rayborn	Office of La	nd and Water Resources	Aquifer:		
Date drilling completed: 5-29-14		P.O. Box 2309 on, MS 39225-2309	E-Log #: RE	CENTER	
L	J (	601)961-5210			
	(60	1)360-0535 (fax)	JUN	20 2014	
State Law requires that this report Department at the above address w	be prepared by the	license holder responsible for to	he work and filed with the		
Well Owner Informat	<i>ion</i>	Well or Bore	hole Location	<b>YLWR</b>	
(Landowner if borehole is not for a water well)		Latitude: 3/ 08 /8" Lor			
Owner Name: D+D Drilling Inc		·		- [	
Mailing Address: P.O. Box 1634		Method of Lat/Long (check one	): Conventional Survey,		
USGS quad, Hand-held GPS, Survey-grade GPS_				-	
Ferriday LA	71334	1	17 T 2N R 14E	_	
City	Zip Code	2 Miles E o	f Pickwick	_	
Telephone No. (318) 757-32	<u> </u>	(Distance) (Direction)	(Nearest Town)		
	Well / B	orehole Data		7	
Date drilling started: 52914 Date	drilling completed:	5/29/14 Hole depth: 80	Hole diameter: 4 11		
Location of the source of any surface v					
Method of dosing and volume of Chlori	ne used in drilling a	nd development:			
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:					
Name of organization running log(s):					
Purpose of borehole (circle one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump					
Seismic Survey Other (describe)					
If drilling is not related to water well construction, skip the remainder of this block					
Purpose of Well (circle all applicable): Home Industrial Public Supply Irrigation Fish Culture					
Other (describe): RiG- SUPPLY					
If a flowing well, method of flow regulation: Valve Other (describe)					
Static Water Level: 10 feet [above or below] land surface Date measured: 5/29/14					
Method of measurement (circle one): Steel tape   Electric tape   Air line   Other (describe):					
Well depth: 80 Well grouted to a depth of: 10 feet Type of grout (circle one): Neat Cement Bentonite Mix					
Casing length: 60 feet Ca	asing diameter:	4 inches Type of c	asing: PVC		
Screen length: 20 feet Screen diameter: 4 inches Type of screen: PVC					
Screen slot size: 1020 inches Setting depth: From 60 feet to 80 feet					
Type of completion (circle all applicable): Gravel packed Underreamed Open hole Natural Development					
Other (describe):					
Top of lap pipe or reduction in casing:					
If telescoped or more than one screen, describe on next page					

County: Marian  Permit #:			Office Use	Only:
The sketch below only required for water wells  If well telescopes, show depths on sketch.	Description of formations enc and boreholes, unless specific			
Ground Level	Description of Formations Encoun	ntered	From (depth) Ground level	To (depth)
	Pea Gravel		13	80
19:19				
- 1100				
11/05 0 S WIII				
HECEIVED SOLL				
Q31				
If more than one screen, show location of each on sketch				
Sketch the property layout and include the following:				
<ol> <li>the well location</li> <li>any permanent structures on the property that may aid</li> <li>any roads, power lines, or other items that may aid in l</li> </ol>	ocating the property and the well			
4) north arrow Huy98 *F	oxworth			
·				
	5.0			
35	well	1		
. I	(c)	1 cays	J	
Hwy	1,5	t po		
_	St Peter Rock Chu	urch Rd		
Landowner Name:				
I HEREBY CERTIFY that the well/borehole was drilled, co requirements of the Mississippi Department of Environm if applicable, and state laws.	onstructed, and completed in a ental Quality and the Mississipp	ccordance oi Departn	e with all applic nent of Health	cable regulations,
Rayborn Drilling Inc 0-60	10/3/14		Q	
Print Name of Responsible Licensee and License No.	Date	Signature	of Licensee	 SWR-1A (4/13

## STATE WELL REPORT

## Marion County: Permit #: Driller: 6an Date completed:

## Part 2

Pump Installer's Completion Report
Mississippi Department of Environmental Quality
Office of Land and Water Resources P.O. Box 2309 Jackson, MS 39225-2309 (601)961-5210

For Office Use Only:				
Well #: <u>070</u>				
Aquifer:				

(601) 360-0535 (fax)						
This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part 1						
of the report must be attached and both parts filed with the Department at the above address within 30 days of well completion.						
Well Owner Information Well Location						
Owner Name: D+D Drilling Inc Latitude: 31° 68' 18" Longitude: 89° 48' 34"						
Owner Name: D+D Drilling Inc Latitude: 31° 68' 18" Longitude: 89° 48' 34"  Mailing Address: P.O. Box 1634 Method of Lat/Long (check one): Conventional Survey,						
USGS quad, Hand-held GPS, Survey-grade GPS						
Ferriday LA 71334 IR 14, Sec 17 T 2N R 14E						
) '						
Telephone No. (318) 757 - 3274 (Distance) (Direction) (Nearest Town)						
Pump Type (circle one)						
Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe):						
Date Pump Installed: 52914 Rated Pump Capacity: 60. Gallons Per Minute						
Is This Pump (circle one): (New ) Repaired Replacement						
Power Type (circle one)						
Electric Diesel Gasoline Natural Gas Tractor PTO Windmill Other (describe):						
Horse Power Rating of Motor: 5 HP Setting Depth: 43 feet Number of Stages: 11						
Pump Test Data for Non Flowing Well						
Date Well Tested: 529114 Duration of Pump Test (minimum 4 hours):hours						
Static Water Level (A): D Feet Below Land Surface Pumping Water Level (B): Feet Below Land Surface						
Drawdown [(B) - (A)]:Feet Below Land Surface Test Pumping Rate:C						
Method of measurement (circle one): Steel tape (Electric tape) Air line Other (describe):						
Pump Test Data for Flowing Well 3UN 20 2014						
Measured shut in head:feet.						
Well yieldedGPM with a drawdown offeet afterhours of pumping OLWR						
Meter Installation						
Meter Manufacturer: Meter Serial Number:						
Meter Model Number/Name:						
Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):						
Installation Date:Meter installed by:						
Is This Meter (circle one): New Repaired Replacement						
Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.						
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.						
Rayborn Drilling Inc 0-60 6/3/14						
Print Name of Pump Installer and License No. (if applicable)  Date  Signature of Pump Installer						

Form: OLWR-SWR-1B (4/13)