### WELL RECORD

**Site ID:** 3314.24.108.9.17.4.1.0.1

**Data reliability:** 3 = C

**Location:** E, S, W = 1.7, 1.4, 0.7

**Alt:** 15.0

**Hyd. Unit (GWDC):** 20

**Well use:** 23.4

**Water use:** 14

**Date:** 21.1.01.0.4.1.9.7.9

**Well depth:** 15.0

**WL:** 5.1

**Temp:** 196.00010

**Cond:** 196.00009

**pH:** 196.00040

**Drill:** 63 - 3.3.0

**Name:** Herron

**Method:** 65 - H

**Finish:** 66 - S

### CASTING

**Top casing:** 77.1 0.1

**Bot. casing:** 78.1 123.1

**Diam.:** 79.4 8.1

### OPENINGS

**Type:** 83 - S

**Diam.:** 87 - 4.1

**Size:** 88 - 15.0

**Top:** 83 - 1.4

**Bottom:** 84 - 1.5

**Type:** 83 - S

**Diam.:** 87 - 1.1

**Size:** 88 - 15.0

### FILE

134 flows 146 pumped.
WATER WELL DRILLERS LOG

<table>
<thead>
<tr>
<th>LANDOWNER:</th>
<th>Panhandle Water Association Inc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rt. 2, Box 123, McCool, MS 3910</td>
<td></td>
</tr>
<tr>
<td>(mailing address)</td>
<td></td>
</tr>
<tr>
<td>WELL LOCATION:</td>
<td>17 16N 10E</td>
</tr>
<tr>
<td>sec.</td>
<td>x</td>
</tr>
<tr>
<td>(distance)</td>
<td>(direction) of (nearest town)</td>
</tr>
<tr>
<td>WELL PURPOSE:</td>
<td>Community Well</td>
</tr>
<tr>
<td>(home, irrigation, municipal, industrial)</td>
<td></td>
</tr>
<tr>
<td>WELL COMPLETION DATA:</td>
<td></td>
</tr>
<tr>
<td>(1) diameter (inches)</td>
<td>8 in.</td>
</tr>
<tr>
<td>(2) total depth (feet)</td>
<td>150 ft</td>
</tr>
<tr>
<td>(3) static water level (feet) below top of ground</td>
<td>51</td>
</tr>
<tr>
<td>(4) casing (material)</td>
<td>Steel 123'</td>
</tr>
<tr>
<td>(6) pump (HP)</td>
<td>7 1/2</td>
</tr>
<tr>
<td>(7) electric log (yes or no)</td>
<td>Yes</td>
</tr>
<tr>
<td>(8) how well bottom plugged</td>
<td>BWV</td>
</tr>
<tr>
<td>description of formations encountered</td>
<td>from</td>
</tr>
<tr>
<td>Red &amp; White Chalk</td>
<td>0 15</td>
</tr>
<tr>
<td>Blue Clay</td>
<td>15 20</td>
</tr>
<tr>
<td>White Chalk/Yellow Sand</td>
<td>20 25</td>
</tr>
<tr>
<td>Blue Clay</td>
<td>25 35</td>
</tr>
<tr>
<td>Red, White, Yellow Chalk: Sand Stks</td>
<td>35 125</td>
</tr>
<tr>
<td>Red Sand</td>
<td>125 153</td>
</tr>
<tr>
<td>Lignite</td>
<td>153 183</td>
</tr>
<tr>
<td>Blue Clay</td>
<td>183 280</td>
</tr>
<tr>
<td>Rock</td>
<td>280 281</td>
</tr>
<tr>
<td>Blue Clay</td>
<td>281 293</td>
</tr>
<tr>
<td>Rock</td>
<td>293 294</td>
</tr>
<tr>
<td>Blue Clay</td>
<td>294 450</td>
</tr>
<tr>
<td>Blue Clay/Stk sand</td>
<td>450 565</td>
</tr>
<tr>
<td>Sand</td>
<td>565 580</td>
</tr>
<tr>
<td>Blue Clay</td>
<td>580 628</td>
</tr>
<tr>
<td>Sand</td>
<td>628 650</td>
</tr>
<tr>
<td>Blue Clay/Sand Stks</td>
<td>650 673</td>
</tr>
<tr>
<td>Rock</td>
<td>673 674</td>
</tr>
<tr>
<td>Blue Clay/Sand Stks</td>
<td>674 687</td>
</tr>
<tr>
<td>Rock</td>
<td>687 688</td>
</tr>
<tr>
<td>Blue Clay</td>
<td>688 691</td>
</tr>
<tr>
<td>Rock</td>
<td>691 692</td>
</tr>
<tr>
<td>Blue Clay</td>
<td>692 714</td>
</tr>
</tbody>
</table>

DEPT OF NATURAL RESOURCES
BUREAU OF LAND & WATER RESOURCES

Received March 80

80 Herndon Well & Supply, Inc. Chortenx
# Public Water Supply Annual Report

<table>
<thead>
<tr>
<th>Name of Water Supply</th>
<th>Panhandle Water Assn.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Water Supply (PWS) ID Number</td>
<td>810001</td>
</tr>
<tr>
<td>County</td>
<td>Chickasaw</td>
</tr>
</tbody>
</table>

**Official Public Water Supply Address (This is the address where all official correspondence is received)**

- **Attention:** Larry McIntire
- **Daytime Phone:** (601) 547-6123
- **Address:** PO Box 173, Weir, MS 39772

**Monthly Bacteriological Sample Results Should be Mailed to:** (Complete if different from official water supply address in above section)

- **Attention:** Larry McIntire
- **Daytime Phone:** (601) 547-6123
- **Address:** PO Box 173, Weir, MS 39772

**Owner/Responsible Official of System (President, mayor, or owner of the water system)**

- **Name:** Samuel Kennedy
- **Address:** Rt 2, Box 89, McCool, MS 39118
- **Home Phone:** (601) 773-2542
- **Work Phone:** ( )

**Water Superintendent/Operator (To be completed by the person who directly supervises and is personally responsible for the daily operation and maintenance of this water system. Must be certified by Mississippi State Department of Health for a community water supply.)**

- **Name:** Larry McIntire
- **Address:** PO Box 173, Weir, MS 39772
- **Home Phone:** (601) 547-6908
- **Work Phone:** (601) 547-6123

**Mississippi State Department of Health Certification Number:** B00499

expiration date: 5/1/93

I certify that I am the person who directly supervises and is personally responsible for the daily operation and maintenance of this public water system and do hold a valid Certificate of Competency as required by Sections 21-27-201 through 21-27-211, Mississippi Code of 1972, Annotated. Signed this 2 day of December 1992.

**Signature of Operator:** Larry McIntire

**Secretary/Treasurer/Bookkeeper**

- **Name:** Mrs Billy W Hunt
- **Address:** Rt 1, Box 171, Weir, MS 39772
- **Home Phone:** ( )
- **Work Phone:** (601) 547-9435

---

### System Information

1. How many usable sources of water (wells for groundwater systems, purchase points if buying water, etc.) does this system have?
   - Wells: 3
   - Purchase Points: __________
   - Surface Water: __________
   - Other: __________ (explain)

2. How many active connections on this system? __________

3. How many people does this system serve? __________

4. How many gallons of water did this system sell during the last calendar year (January-December)? __________

5. What was the peak month for water sales during the last calendar year and how many gallons of water were sold during that month?
   - Month: __________
   - Gallons Sold: __________

6. The charge to the customer for the first __________ gallons of water is $1.30.

This Annual Report is to be completed and returned to the Division of Water Supply no later than February 29, 1992. Information from this report will be used to update our files and for determining compliance with the laws and regulations governing public water supplies in Mississippi. Return the completed report to: Division of Water Supply; P. O. Box 1700; Jackson, Mississippi 39215-1700.

Who completed this report? Name: Mrs Billy W Hunt

**Signature:** Mrs Billy W Hunt

**Date:** 2/17/92

**Mississippi State Department of Health**

**Revised:** 12-17-91

**Form No. 903**

---

**White Copy = Training & Certification**

**Canary Copy = Compliance Branch**

**Pink Copy = Water System**

**Goldenrod Copy = Regional Engineer**
DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR

PUBLIC SUPPLY WELLS PROJECT

GPS LOG

USER NAME(S): Hornbeak 

DATE: 10/30/96

UNIT DEQ #: 82859

FILE #: B103020B

HEALTH DEPT. #: 100006 - 02 Abandoned

ELEV. 

USGS #: J38 

OLWR #: GW01153

OWNER: Pawhackle W/A #1

QUAD: McCool

LOCATION: SE-SW S 17 T 16 N R 10 E

COUNTY: Choctaw

LOCATION DESCRIPTION: In small fence on west side of Weir-McCool Rd.

.75 mi. South of Fork Intersection with S. Main St. (Weir)

CASING DIA: 8” 

PUMP TYPE & SIZE: Abandoned/Pump Removed

GPS FIELD LOCATION: LAT. 33° 14' 38.1" LONG. 89° 17' 29.4"

GPS CORRECTED LOCATION: LAT. 33 2440001 LONG. 89.29156845

REMARKS:

GPS not well,

*(This well went bad & is being abandoned.)*

*(They will be drilling another well nearby to replace it.)*