

Eng.

Ray Barker
Marks
FORM 9-1642
(1-68)

DEC 23 1975

Well No. F39

WELL SCHEDULE
GEOLOGICAL SURVEY

Elog # 23
WATER RESOURCES DIVISION

MASTER CARD

Record by Q Source of data MSGs Date 6/75 Map _____

State MS 28 County (or town) COAHOMA 14

Latitude: 34¹ 17² 22³ N⁴ Longitude: 09¹² 02¹³ 28¹⁴ 24¹⁵ Sequential number: 1

Lat-long accuracy: 2¹⁶ 28¹⁷ 3¹⁸ 23¹⁹ NW²⁰ NE²¹ NE²²

Local well number: F039AA2328N03W Other number: #1 B & M

Local use: 001023 Owner or name: _____

Owner or name: MOORE BAYOU Address: _____

Ownership: (C) County, (F) Fed Gov't, (M) City, (N) Corp or Co, (P) Private, (S) State Agency, (W) Water Dist. N

Use of water: (A) Air cond, (B) Bottling, (C) Comm, (D) Dewater, (E) Power, (F) Fire, (H) Dom, (I) Irr, (M) Med, (N) Ind, (P) S, (R) Rec, (S) Stock, (T) Instit, (U) Unused, (V) Reppure, (W) Recharge, (X) Desal-P S, (Y) Desal-other, (Z) Other. F

Use of well: (A) Anode, (D) Drain, (G) Seismic, (H) Heat Res, (I) Obs, (P) Oil-gas, (R) Recharge, (T) Test, (U) Unused, (W) Withdraw, (X) Waste, (Z) Destroyed. W

DATA AVAILABLE: Well data Freq. W/L meas.: Field aquifer char.

Hyd. lab. data: _____

Qual. water data; type: _____

Freq. sampling: _____ Pumpage inventory: yes, no, period: _____

Aperture cards: _____ yes

Log data: Elog 18'-790'-760'-1139' E

WELL-DESCRIPTION CARD

SAME AS ON MASTER CARD Depth well: _____ ft 1120 Meas. 3

Depth cased; (first perf.) _____ ft 1080 Casing type: _____; Diam. 10X8 in 1:0

Finish: (C) porous concrete, (F) gravel w. (perf.), (G) gravel w. (screen), (H) horiz. gallery, (I) open perf., (P) screen, (S) sd. pt., (T) shored, (W) open hole, (X) other, (Z) other. S

Method: (A) air, (B) bored, (C) cable, (D) dug, (H) hyd jetted, (J) air rot., (P) reverse percuss, (R) rotary, (T) air reverse, (U) trenching, (V) driven, (W) drive wash, (Z) other. 32

Date Drilled: 5-16-75 975 Pump intake setting: _____ ft _____

Driller: Lipe name _____ address _____

Lift (type): (A) air, (B) bucket, (C) cent. jet, (J) multiple (cent.), (L) multiple, (M) multiple, (N) none, (P) piston, (R) rot, (S) submerg, (T) turb, (Z) other. 7 Deep Shallow

Power (type): (nat) diesel, elec, gas, gasoline, hand, gas, wind; (LP) 40 hp Trans. or meter no. _____

Descrip. MP _____ ft above LSD, Alt. MP _____

Alt. LSD: _____ Accuracy: (source) topo 3

Water Level: _____ ft above MP; _____ ft below LSD 9 Accuracy: _____ D

Date meas: 5/30/75 595 Yield: #80 gpm 503 Method determined _____

Drawdown: _____ ft _____ Accuracy: _____ Pumping period _____ hrs _____

QUALITY OF WATER DATA: Iron _____ ppm Sulfate _____ ppm Chloride _____ ppm Hard. _____ ppm

Sp. Conduct _____ K x 10⁶ Temp. _____ °F Date sampled _____

Taste, color, etc. _____

Well No.

HYDROGEOLOGIC CARD

SAME AS ON MASTER CARD Physiographic Province: 03 Section: _____

Drainage Basin: E Subbasin: 15F

Topo of well site: (D) depression, stream channel, dunes, flat, hilltop, sink, swamp, (E) offshore, pediment, hillside, terrace, undulating, valley flat

MAJOR AQUIFER: _____ system _____ series _____ aquifer, formation, group _____

Lithology: _____ Origin: _____ Aquifer Thickness: _____ ft

Length of well open to: _____ ft 40 Depth to top of: _____ ft _____

MINOR AQUIFER: _____ system _____ series _____ aquifer, formation, group _____

Lithology: _____ Origin: _____ Aquifer Thickness: _____ ft

Length of well open to: _____ ft _____ Depth to top of: _____ ft _____

Intervals Screened: _____

Depth to consolidated rock: _____ ft _____ Source of data: _____

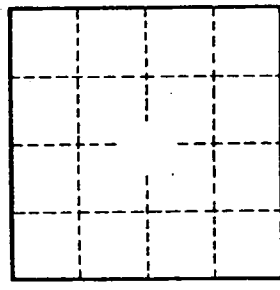
Depth to basement: _____ ft _____ Source of data: _____

Surficial material: _____ Infiltration characteristics: _____

Coefficient Trans: _____ gpd/ft _____ Coefficient Storage: _____

Coefficient Perm: _____ gpd/ft²; Spec cap: _____ gpm/ft; Number of geologic cards: _____

10" to 1060 "010 or .012
 8" screen
 566 gpm #58
 65' setting bowl pump p.
 85' ss



Well No. _____

RECEIVED

APPLICATION FOR PERMIT TO DIVERT OR WITHDRAW FOR BENEFICIAL USE THE PUBLIC WATERS OF THE STATE OF MISSISSIPPI

APR 07 1999

DEPARTMENT OF ENVIRONMENTAL QUALITY, OFFICE OF LAND AND WATER RESOURCES

Office of Environmental Quality, Box 10631, JACKSON, MS 39289-0631; (601) 961-5202
Office of Land & Water Resources

This box is for office use only.

5-25-99 AGN.

FORM OLWR-AP-2 (REV. 9/94)

| | | | |
|------------------|--------------------|-------------|--------------|
| Issued: 10-24-89 | Expires: 5-25-2009 | Fee Paid: X | Permit No. |
| Lat. 341727 | Long. 902809 | Elev. 172 | USGS No. |
| Quad. JONESTOWN | ASCS Farm No. | STAC. | MSDOH No. |
| Aquifer: MUX | Tract No. | | Basin No. |
| Remarks: | | | Dam Inv. No. |

THIS APPLICATION IS FOR (Circle one): NEW PERMIT RENEWAL PERMIT NO. MS-GW-009511

THIS APPLICATION IS FOR (Circle one): GROUNDWATER - COMPLETE A,B,E
 SURFACE WATER - COMPLETE A,C,D,E

BENEFICIAL USE (Circle one or more): 1) Public Supply - Municipal, Rural Water, or Private Water 2) Irrigation
3) Industrial 4) Fish Culture 5) Recreation 6) Institutional (eg. Church, School) 7) Commercial (eg. Hotel, Casino, Restaurant) 8) Fire Protection 9) Livestock 10) Flood Protection 11) Other: _____

SECTION A (to be completed by ALL APPLICANTS)

LANDOWNER: MOORE BAYOU WATER ASSOCIATION, INC. 64-0561749
(Name) (SSN or Tax ID No.)
POST OFFICE BOX 374

(Address)

MARKS MS 38646 (601) 326 3322
(City) (State & Zip) (Telephone No.)

APPLICANT, AGENT, OR LESSEE (if different from Landowner):

(Name) (SSN or Tax ID No.)

(Address)

(City) (State & Zip) (Telephone)

Location of diversion/withdrawal point (A suitable map with location marked must accompany this application):

NE 1/4 of the NE 1/4 of Section 23, Township 28N, Range 03W, County COAHOMA

Does the land to which this application pertains have any source(s) of water other than that for which you are now applying (circle one) YES NO If yes, describe the nature and amount of any additional supply and, if applicable, list permit number: MS-GW-15292; new well located in SW 1/4 of the SW 1/4 of Section 12, Township 27N, Range 03W of Coahoma County; Maximum rate: 400 gpm. This well should be completed & operational by June, 1998.

SECTION B (to be completed for GROUNDWATER SOURCE)

1. AQUIFER: MERIDIAN- UPPER WILCOX MISSISSIPPI DEPARTMENT OF HEALTH NO.: 140012-01

2. Proposed work will begin on _____, 19____, and will be completed by _____, 19____.

If well has already been drilled, when was well completed (date)? 19 75. Under whose name was well originally drilled (if known)? MOORE BAYOU WATER ASSOCIATION, INC.

3. Description of proposed or completed well:

(a) DEPTH OF WELL: 1120 feet. DRILLER: LIPE DRILLING, POPE, MS

(b) SURFACE CASING: Length 1180 feet; Diameter 10 inches; Type STEEL

(c) SCREEN: Length 40 feet; Diameter 8 inches; Type _____

(d) PUMP: Type LAYNE; Size _____; Capacity 535 gallons per minute; Setting depth 60 feet

(e) POWER UNIT: Type _____; Size _____ horsepower

4. PERMITTED VOLUME :

(a) _____ acre-feet per year at a maximum rate of _____ gallons per minute

(b) 0.090 million gallons per day at a maximum rate of 535 gallons per minute

0.090 M3 4/19/99

(CONTINUED ON BACK)

535

SECTION C (to be completed for **SURFACE WATER SOURCE**)

1. Source of water is from _____ which drains into _____
which drains into _____
(major stream or river)
2. Description of pump/diversion works:
Pump (size & type): _____ Power Unit (size & type): _____
Lift: _____ feet Maximum capacity: _____ gallons per minute
3. _____ acre-feet per year at a maximum rate of _____ gallons per minute

SECTION D (to be completed for **SURFACE WATER IMPOUNDMENTS (DAMS)** on continuously flowing streams)

1. Name of storage reservoir: _____ Dam Height: _____ feet
2. Surface area at normal pool: _____ Storage capacity at normal pool: _____ acre-feet

SECTION E WATER USE DATA (ALL APPLICATIONS - complete section related to beneficial use)

1. **IRRIGATION:** List the number of acres of each crop to be irrigated: Rice _____; Cotton _____; Oats _____; Corn _____; Soybeans _____; Pasture _____; Truck _____; Wheat _____; Grain Sorghum _____; Other (specify) _____ Acres

A. Method of Irrigation (circle one) - Center Pivot Flood Furrow

B. Land Condition (circle one) - Precision Land Formed Smoothed

C. ASCS Farm No. _____ Tract No. _____

2. **FISH CULTURE:** Explain how water will be used: _____
How often will reservoir (s) be emptied and refilled? _____

3. **MUNICIPAL, WATER ASSOCIATION, or PRIVATE WATER SYSTEM**

Chose "a" or "b". (a) The number of people served is 1085 or (b) The number of connections is 310

What is the estimated average daily consumption during periods of maximum use at the end of each five-year period during the next twenty (20) years?

| | | | | | | | |
|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| <u>.200</u> | <u>2003</u> | <u>.200</u> | <u>2008</u> | <u>.200</u> | <u>2013</u> | <u>.200</u> | <u>2018</u> |
| (Volume) | (Year) | (Volume) | (Year) | (Volume) | (Year) | (Volume) | (Year) |

4. **INDUSTRIAL:** If the water is to be released into a watercourse, indicate the amount released each year _____
Rate of release _____; NPDES Permit No. _____
Explain any changes in quality of water to be released: _____
Explain how water will be used: _____
How much groundwater will be used for once-through non-contact cooling? _____

5. **RECREATION:** Explain how water will be used: _____

6. **OTHER USE:** Explain in detail (if needed, attach another page): _____

7. **REMARKS:** _____

List below the person to be contacted for additional information if required.

CHARLES M. VEAZEY, SEC/TREAS.

(Name)
MOORE BAYOU WATER ASSOCIATION, INC.
P. O. BOX 374

(Address)

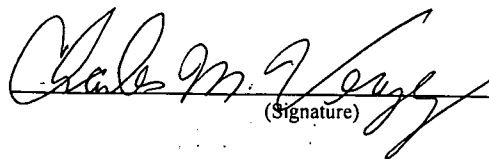
MARKS MS 38646

(City, State, Zip)

601-326-3322

(Telephone)

The accompanying map is hereby declared a part of this application. For irrigation and fish culture use, an ASCS photograph is required. The **TEN DOLLAR (\$10.00)** permit fee is enclosed herewith.


(Signature)

Subscribed and sworn to before me this 5th day of April, 19 99, at 4 PM County of Quitman

My commission expires 6/4/01; James E Clayton A Notary Public.

RECEIVED

14060039

F-39

MAR 24 1988

RETURN COMPLETED FORM TO:

Bureau of Land and Water Resources
P.O. Box 10631
Jackson, Mississippi 39208
Telephone (601) 961-5200

Department of Natural Resources
Bureau of Land & Water Resources

For Office Use Only:
County: COAHOMA 27
Date Received:
Permit No: GW-009511
Quad Map: JONESTOWN
Water Management Dist:
Hydrologic River Basin: 08030207

NOTICE OF CLAIM FOR CONTINUED USE
OF SURFACE/GROUND WATERS FOR BENEFICIAL USE

Pursuant to the laws of the State of Mississippi, namely §51-3-5 (2) or (3), as amended, I, the landowner, _____

Moore Bayou Water Assn Inc (Name)
P.O. Box 374 (Address)
MARKS (City or Town)
MS 38646 (State and Zip)
(601) 326 6921 (Telephone Number)
do hereby file claim for the continued use of: (circle one)

surface water ground water for the following beneficial use: (circle one or more)

municipal; irrigation; recreation; livestock water; fish culture; industrial;

Other _____ (Specify)

1. Name & Address of agent or applicant if different from landowner.

(Name) (S/S or Tax ID No.) (Address)
(City or Town) (State and Zip) (Telephone Number)

2. Location of point of diversion/withdrawal (include location map with claim)

NE 1/4 of NE 1/4 of Section 23, Township 28 North, Range 3 West, County COAHOMA

3. Volume of water diverted/withdrawn:

(1) _____ acre feet per year, diverted/withdrawn at a maximum rate of _____ gallons per minute; or

(2) .200 million gallons per day, diverted/withdrawn at a maximum rate of 555 gallons per minute.

4. Description of lands on which water will be used:

(a) Copy legal description of property upon which water is to be used (may be copied word for word from your deed).

Attach separate sheet if necessary _____

(b) Has the above described land any water right or source of water supply other than that herein applied for?

(Water Rights Number(s) _____) Describe the nature and amount of any additional supply _____

SECTION A (to be completed if source of water is from surface supply)

MUWX

1. Prior water rights permit/license number 10/24/89, dated 10/24/99

2. Source of supply is LAT 34 17 28 which drains into LONG 90 28 55
ELEV 172 which drains into _____

3. Description of diversion works:

(a) Water obtained directly from stream: _____ (Name)

Pump _____ (Size and type) Power Unit _____ (Size and type)

Lift _____ ft. Maximum capacity _____ gpm

(b) Storage reservoir _____ (Name)

Height of dam _____ feet. Surface area at normal pool _____ acres

Storage capacity at normal pool _____ acre feet

SECTION B (to be completed if source of water is from underground supply)

1. Source of supply: Mechanic Sample aquifer(s)
 2. Description of water well:
 - (a) **Well data:**
 - (1) Date well completed 1975
 - (2) Depth drilled 1120 feet
 - (3) Type of completion Air
 - (4) Surface elevation 175 feet
 - (b) **Screen data:**
 - (1) Depth to bottom 1120 feet
 - (2) Length 40 feet
 - (3) Diameter 8 inches
 - (4) Type _____ inches
 - (5) Slot _____ inches
 - (c) **Casing data:**
 - (1) Length(s) 1180 feet; Diameter(s) 10 inches
 - (2) Type Steel
 - (d) **Pump data:**
 - (1) Type & Size Layne
 - (2) Capacity 535 gpm
 - (3) No. stages _____
 - (4) Setting depth 60 feet
- Well Driller: Lipe Drilling (Name of Company) Pope

WATER USE DATA

1. IRRIGATION use: (a) Show number of acres to be irrigated by 40-acre blocks:

| TOWN-SHIP | RANGE | SEC. | NE¼ | | | | NW¼ | | | | SW¼ | | | | SE¼ | | | | TOTALS |
|-----------|-------|------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------|
| | | | NE¼ | NW¼ | SW¼ | SE¼ | NE¼ | NW¼ | SW¼ | SE¼ | NE¼ | NW¼ | SW¼ | SE¼ | NE¼ | NW¼ | SW¼ | SE¼ | |
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |

- (b) List the acres to be irrigated: Rice _____; Cotton _____; Corn _____; Pasture _____; Truck _____; Other crops (_____) _____ acres.
2. If for MUNICIPAL use: (a) Present population 2000, (based on 19____ Census)
- (b) Estimated average daily consumption during periods of maximum use at the end of each five-year period in next twenty years: .200 1990; .200 1995; .200 2000; .200 192005
3. If for INDUSTRIAL use: (a) If water is to be released into a watercourse, indicate: Amount released each year _____; rate of release _____; location of release point in reference to diversion point _____ (show location on map)
- (b) Explain any change in quality of water to be released: _____
4. If for RECREATIONAL use: Explain how water will be used _____
5. If for FISH CULTURE use: (a) Explain in detail how water will be used _____
- (b) Number of times reservoir will be emptied and filled annually: _____
6. If for ANY OTHER use: (a) Explain in detail _____

REMARKS _____

List below the name and address of person to be contacted for additional information, if required. The accompanying map is hereby declared a part of this application.

Raymond Barber, P.E. (Name)
330 Maple (Address)
Mark, MS

Katherine W. Furr (Signature)

Subscribed and sworn to before me this 21st day of March 19, 88, at Clarksdale
 County of Cochran, Mississippi. My commission expires Nov. 29, 1988

J. H. Roberts Notary Public

DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR

PUBLIC SUPPLY WELLS PROJECT

GPS LOG

USER NAME(S): Grantham DATE: 5-7-97

UNIT DEQ #: _____ FILE #: B050717C

HEALTH DEPT. #: 140012-01 ELEV. 172

USGS #: F-39 OLWR #: MS-GW-99511

OWNER: Moove Bayou Wtr Assoc

LOCATION: NW, NE, NE S 23 T 28 N R 03 W COUNTY: Coahoma

LOCATION DESCRIPTION: On Hwy 61 to Eagle Nest Rd

CASING DIA: _____ PUMP TYPE & SIZE: _____

GPS FIELD LOCATION: LAT. 37 17 28.9 LONG. 90 28 21.3

GPS CORRECTED LOCATION: LAT. 34 29 13.58 LONG. 90.47259124

REMARKS: _____

