

DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR
PUBLIC SUPPLY WELLS PROJECT

GPS LOG

USER NAME(S): Grant Lam DATE: 9/6/96
UNIT DEQ #: _____ FILE #: A090615F
HEALTH DEPT. #: 140002-0811 ELEV. 170'
USGS #: D-136? OLWR #: MS-GW-7295
OWNER: City of Clarksdale #16(3)
LOCATION: SW SE S 15 T 27N R 4W COUNTY: Coahoma
LOCATION DESCRIPTION: near King St behind Heidelberg School
40-50' E of Well #3
CASING DIA: _____ PUMP TYPE & SIZE: Turbine
GPS FIELD LOCATION: LAT. 34.12289 LONG. 90.35.682
GPS CORRECTED LOCATION: LAT. 34.20488167 LONG. 90.59454163
REMARKS: old well 100 west of this well not in service
Clarksdale Road

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

RECEIVED
JAN 21 1997
Dept. of Environmental Quality
Office of Land & Water Resources

DEPARTMENT OF ENVIRONMENTAL QUALITY, OFFICE OF LAND AND WATER RESOURCES
P.O. BOX 10631, JACKSON, MS 39289-0631; (601) 961-5202

This box is for office use only.

9-8-98 AGN.

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

Issued: 5-26-87	Expires: 9-8-2008	Fee Paid: X	Permit No.
Lat. 34-92-10	Long. 90-35-39	Elev. 172	USGS No.
Quad. Clarksdale	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. GW-007295

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: City of Clarksdale 64-6000245
 (Name) (SSN or Tax ID No.)
P. O. Box 940
 (Address)
Clarksdale Mississippi 38614 (601) 627-4761
 (City) (State & Zip) (Telephone No.)

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

 (Name) (SSN or Tax ID No.)

 (Address)

 (City) (State & Zip) (Telephone)

No MAP

Location of diversion/withdrawal point (A suitable map with location marked must accompany this application):
SW 1/4 of the SE 1/4 of Section 15, Township 27N, Range 4W, 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. GW - 004974/0.576 MGD @ 1,200 GPM Capacity. This well is used as back up only due to treatment requirements with geolite softener.

SECTION B (to be completed for GROUNDWATER SOURCE)

- AQUIFER: Meridian-Upper Wilcox MISSISSIPPI DEPARTMENT OF HEALTH NO.: 140002-11
- Proposed work will begin on _____, 19____, and will be completed by _____, 19____.
 If well has already been drilled, when was well completed (date)? November 4, 19 86. Under whose name was well originally drilled (if known)? City of Clarksdale
- Description of proposed or completed well:
 - DEPTH OF WELL: 1,299 feet. DRILLER: Layne Central Company
 - SURFACE CASING: Length 1,222 feet; Diameter 16 inches; Type Welded Steel
 - SCREEN: Length 71 feet; Diameter 10 inches; Type S.S. Wire-Wrapped
 - PUMP: Type Elec. Vert. Turb Size 12"; Capacity 1000 gallons per minute; Setting depth 155 feet
 - POWER UNIT: Type Elec.: 480V/3Ø/60Hz; Size 100 horsepower
- PERMITTED VOLUME:
 - 0.48 million gallons per year at a maximum rate of _____ gallons per minute
 - 0.48 million gallons per day at a maximum rate of 1,000 gallons per minute

(CONTINUED ON BACK)

360

1000

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)

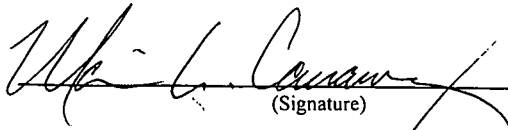
1. **IRRIGATION:** List the number of acres of each crop to be irrigated: Rice _____; Cotton _____; Oats _____; Corn _____; Soybeans _____; Pasture _____; Truck _____; Wheat _____; Grain Sorgum _____; Other (specify) _____ Acres _____
A. Method of Irrigation (circle one) - Center Pivot Flood Furrow
B. 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 _____ or (b) The number of connections is 7,013
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?

0.480	1997	0.480	2002	0.480	2007	0.480	2012
(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.

Marvin L. Carraway, General Manager
(Name)
Clarksdale Public Utilities Commission
City of Clarksdale
(Address)
P. O. Box 70
Clarksdale, MS 38614
(City, State, Zip)
(601) 627-8403
(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 16th day of Jan., 1997, at Coahoma County of MS.
My commission expires _____; Edie P. Anderson Notary Public.

