Form 9-1642
Doh # 150003-01
Well No. DT

U.S. Dept. of the Interior
Geological Survey
WATER RESOURCES DIVISION

MASTER CARD

Record by WCR
Source of data Driller
Drilled County Map
State
County (or town)
Map

Latitude: 31° 15' 8.5" N
Longitude: 100° 21' 42.7" W

Local well number: 4-07-25 NW 1/4 Sec 25
Other number: 8 & H

Local use: Crystal Springs
Owner or name:

Ownership: (C) (E) (N) (P) (S) (W)

Use of water: (A) (B) (C) (D) (E) (F) (H) (I) (M) (P) (R)


DATA AVAILABLE:

Well data Field aquifer char
Freq. W/L meas.

Hyd. lab. data:

Qual. water data:

Freq. sampling:
Pumpage inventory: yes

Aperture cards:

Log data:

WELL-DESCRIPTION CARD

SAME AS ON MASTER CARD

Depth well:

Casing

Diam.:

Open

pore

gravel

w.

gravel

w.

gravel

hole

screen

open

pipe

pipe

shored

shored

other

other

Method:

Air bored, cable, dug, hyd jetted, air reverse trenching, driven, drive

Drilled:

Date:

Driller:

Lift:

Air

Deep

Shallow

Power:

Diesel, electric, gas, gasoline, hand, gas, wind, H.P.

Descrip.

Alt. LSD:

Water level:

Date:

Yield:

Drawdown:

Accuracy:

Quality of

WATER DATA:

Sp. Conduct:

Taste, color, etc.

6/15/94 CAR/DRB
### HYDROGEOLOGIC CARD

| Physical 
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Province:</td>
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<tr>
<td>Drainage Basin:</td>
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<tr>
<td>Subbasin:</td>
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<tr>
<td>Section:</td>
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</tbody>
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#### Topo of well site:
- depression, stream channel, dunes, flat, hilltop, sink, swamp, offshore, sediment, hillside, terrace, undulating, valley flat

#### MAJOR AQUIFER:
- System: |
- Series: |
- Aquifer, formation, group: |
- Aquifer Thickness: |
- Origin: |
- Length of well open to: |
- Depth to top of: |

#### MINOR AQUIFER:
- System: |
- Series: |
- Aquifer, formation, group: |
- Aquifer Thickness: |
- Origin: |
- Length of well open to: |
- Depth to top of: |

#### Intervals Screened:
- 20' 0'' 76.5'' Sh-Hr. #7

#### Depth to consolidated rock:
- ft |

#### Depth to basement:
- ft |

#### Surficial material:
- Infiltration characteristics: |

#### Coefficient:
- Trans: gpd/ft |
- Storage: |
- Coefficient: |
- Perm: gpd/ft²; Spec cap: gpm/ft; Number of geologic cards: |
DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR
PUBLIC SUPPLY WELLS PROJECT

GPS LOG

USER NAME(S): LAK / DRS
DATE: 6/15/94

UNIT DEQ #: 82859
FILE #: A06178C

HEALTH DEPT. #: 150003-01
ELEV. 2440

USGS #: D-007
OLWR #: 2271

OWNER: Crystal Springs Water Service

LOCATION: NW/NE/SE/SW 1/4 T 14N R 24W
COUNTY: Copiah

LOCATION DESCRIPTION: NE corner of Sheldon (6em) Plant

on Kirk Street, C.E. of Water plt. 46L

CASING DIA: 12" PUMP TYPE & SIZE: Sub.

GPS FIELD LOCATION: LAT. 31-59-00
LONG. 90-21-36

GPS CORRECTED LOCATION: LAT. 31-58-57.187
LONG. 90-21-34.082

REMARKS: On top of well

[Signatures]

[Signature]

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

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

Issued: 4-26
Expired: 4-25-96
Fee Paid: $450
Permit No. 15003-01
USGS No. 37-750-08
Elev. 465
MSDHC No. 2-13-2002
ASCS Farm No. STAC.
TRAct No.

RECEIVED FEB 23 1995

THIS APPLICATION IS FOR (Circle one): NEW PERMIT RENEWAL - PERMIT NO. 05-6W-02271

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 (2) Irrigation
(3) Industrial (4) Fish Culture (5) Recreation (6) Institutional (7) Commercial (8) Fire Protection
Restaurant (9) Livestock (10) Flood Protection (11) Other:

SECTION A (to be completed by ALL APPLICANTS)

LANDOWNER: City of Crystal Springs
(Name) 64600 304
(SSN or Tax ID No.)
210 East Railroad Ave P.O. Box 473
(Address)
Crystal Springs, Miss. 39059 (601) 892-1210
(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):

Yes (NO) if yes, describe the nature and amount of any additional supply and, if applicable, list permit number.

SECTION B (to be completed for GROUNDWATER SOURCE)

1. AQUIFER: #1 North Cross Plant Water Well
(MISSISSIPPI DEPARTMENT OF HEALTH NO. 15003-01)

2. Proposed work will begin on May 19, 1988, and will be completed by May 19, 1988. Under whose name was well originally drilled (if known)?

3. Description of proposed or completed well:
   (a) DEPTH OF WELL: 108 feet
   (b) SURFACE CASING: Length 93 feet, Diameter 12 inches; Type Welded Black Steel
   (c) SCREEN: Length 15 feet; Diameter 10 inches; Type Stainless Steel Shuttle
   (d) PUMP: Submersible; Size 6 1/2; Capacity 160 gallons per minute; Setting depth 110 feet
   (e) POWER UNIT: Type Franklin Electric; Size 7.5 horsepower

4. PERMITTED VOLUME:
   (a) 37,750 gallons per year at a maximum rate of 160 gallons per minute
   (b) 37,750 gallons per day at a maximum rate of 160 gallons per minute

(Continued on back)
SECTION C (to be completed for SURFACE WATER SOURCE)

1. Source of water is from ____________________________ 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 ____________________________ or (b) The number of connections is ____________________________
   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?
   
   (Volume) (Year) (Volume) (Year) (Volume) (Year) (Volume) (Year)
   2001 45,677 2006 50,245,679
   2002 45,677 2007 50,245,679
   2003 45,677 2008 50,245,679
   2004 45,677 2009 50,245,679
   2005 45,677 2010 50,245,679

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:
   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.

Robert J. Simms

3411 W. R. R Ave P.O. Box 191

Crystal Springs, Miss. 39059

601-892-411

(Address)

Subscribed and sworn before me this 17th day of February, 1996 at 9:58 a.m. County of Copiah

My commission expires

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.

Robert J. Simms

(Signature)

Linda L. Caston

Notary Public