

WELL SCHEDULE

U. S. DEPT. OF THE INTERIOR

GEOLOGICAL SURVEY

WATER RESOURCES DIVISION

MASTER CARD

Record by BEW Source of data Driller Date 11/65 Map Gallman

State 218 County (or town) Coeleish Sequential number: 115

Latitude: 31° 55' 49" N Longitude: 09° 02' 31" W

Lat-long accuracy: 30' T 10" S, R 2" E Sec 15 NE NW, NW, NE

Local well number: 1029BA1501NO2W Other number: 184

Local use: 184 N 65 70 Owner or name: COPIAH W.A.

Owner or name: ALLMAN Address: _____

Ownership: County, Fed Gov't, City, Corp or Co, Private, State Agency, Water Dist M

Use of water: (A) Air cond, Bottling, Comm, Dewater, Power, Fire, Dom, Irr, Med, Ind, P S, Rec, (S) Stock, Instit, Unused, Repressure, Recharge, Desal-P S, Desal-other, Other WA P

Use of well: (A) Anode, Drain, Seismic, Heat Res, Obs, Oil-gas, Recharge, Test, Unused, Withdraw, Waste, Destroyed. U

DATA AVAILABLE: Well data 70 Freq. W/L meas.: 71 Field aquifer char. 72

Hyd. lab. data: _____ 73

Qual. water data; type: USGS 8/71 74 C

Freq. sampling: 75 Pumpage inventory: 76

Aperture cards: 77 CTHL yes

Log data: _____ 78 79

WELL-DESCRIPTION CARD

SAME AS ON MASTER CARD Depth well: 215 ft Meas. 24 C

Depth cased; (first perf.) 175 ft Casing type: EXG in 9

Finish: porous concrete, gravel w. (perf.), gravel w. (screen), horiz. gallery, end, other 31

Method Drilled: air bored, cable, dug, hyd jettied, air rot., percussion, rotary, reverse trenching, driven, drive wash, other 32

Date Drilled: 9/65 Pump intake setting: _____ ft 36 38

Driller: Shiner Drilling Co. Columbia

Lift (type): air, bucket, cent, jet, multiple, multiple, none, piston, rot, submerg, turb, other 39 Deep 40

Power (type): diesel, elec, gas, gasoline, hand, gas, wind; H.P. 10 U Trans. or meter no. 41

Descrip. MP 47A ft above below LSD, Alt. MP _____

Alt. LSD: 472 Accuracy: (source) 47 3

Water Level: _____ ft above below MP; _____ ft below LSD Accuracy: 48 51 84 52 D

Date meas: 11/65 Yield: _____ gpm 53 55 150 Method determined 61

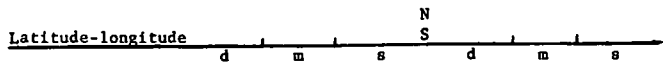
Drawdown: _____ ft 62 64 Accuracy: _____ 65 66 21 68

QUALITY OF WATER DATA: Iron 2 ppm 69 Sulfate 11 ppm 70 Chloride 10 ppm 71 Hard. 5 ppm 72

Sp. Conduct 200 K x 10⁶ 73 Temp. _____ °F 74 76 Date sampled 8/71 77 79

Taste, color, etc. pH 5.2

6/14/94 CAR/DRB



HYDROGEOLOGIC CARD

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

Drainage Basin: 113V **Subbasin:** _____

Topo of well site: (D) depression, stream channel, dunes, flat, hilltop, sink, swamp, (E) (F) (H) (K) (L) (O) (P) (S) (T) (U) (V) offshore, pediment, hillside, terrace, undulating, valley flat _____

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

Lithology: _____ **Origin:** 3 **Aquifer Thickness:** _____ ft

Length of well open to: 50 ft **Depth to top of:** 40 ft **Aquifer Thickness:** 165 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:** _____

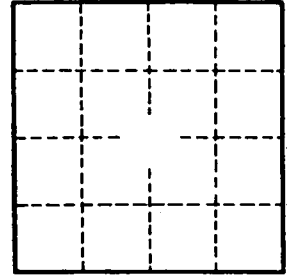
Depth to basement: _____ ft **Source of data:** _____

Surficial material: _____ **Infiltration characteristics:** _____

Coefficient Trans: 30,000 gpd/ft **Coefficient Storage:** _____

Coefficient Perm: 600 gpd/ft²; **Spec cap:** 7.0 gpm/ft; **Number of geologic cards:** _____

0-10 Top soil
 10-131 Sd + gr.
 131-165 Blue shale
 165-215 Sd



Well No.

J29

J-29

MOCN

The box below is for office use only.

Issued: 10-8-91	Expires: 10-8-2001	Fee Paid: <input checked="" type="checkbox"/>	Permit No. GW-13037
Lat. 31-55-56	Long. 90-23-19	Elev. 472	USGS No.
Quad. GALLMAN	Dist.		Basin No. 03180003
STAC			Dam Inv. No.
			Dam appl. No.

Dept. of Natural Resources, Bureau of Land and Water Resources, P.O. Box 10631, Jackson, MS 39289-0631

RECEIVED

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

OCT 05 1990

Department of Natural Resources
Bureau of Land & Water Resources

This application is for (circle one): GROUNDWATER SURFACE WATER

Beneficial Use (circle one or more): Irrigation Fish Culture Municipal Rural Water Association Industrial
Recreation Institutional (Examples: Church, School) Commercial (Examples: Hotel, Restaurant) Livestock Standby
Fire Protection Flood Protection Other: _____

LANDOWNER:

Copiah Water Association, Inc. (Name) 64-0475110 (S/S or Tax ID No.)

P. O. Box 325 (Address)

Gallman (City) MS 39077 (State and Zip) (601) 892-3738 (Telephone Number)

HO # 15004-01

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

(Name) (S/S or Tax ID No.)

(Address)

(City) (State and Zip) (Telephone Number)

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

NW 1/4 of the NE 1/4 of Section 15, Township 1N, Range 2W, County Copiah

Volume of water diverted/withdrawn (Choose "a", "b", "c", or "d" ["d" is for units other than those shown in "a", "b", or "c"]):

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

(b) .14 million gallons per day at a maximum rate of 200 gallons per minute

(c) _____ acre feet of storage at normal pool

(d) _____ per _____ at a maximum rate of _____

Construction ~~of proposed work will begin on (date)~~ Complete _____, 19____ and will be completed by (date) _____, 19____

Water will be used from (month) _____ to (month) _____ each year.

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 numbers.

SECTION A (to be completed if application is for surface water source)

1. Source of water is from _____ which drains into _____ which drains into _____ which drains into _____

2. Description of pump/diversion works:
(a) Pump (size and type): _____ Power Unit (size and type): _____
Lift: _____ feet Maximum capacity: _____ gallons per minute.
(b) Name of storage reservoir: _____ Dam height: _____ feet.
Surface area at normal pool: _____ acres. Storage capacity at normal pool: _____ acre-feet.

(Continued on back)

SECTION B (to be completed if application is for groundwater source)

1. Source of water is _____ aquifer.
2. Description of proposed water well:
 - (a) DEPTH OF WELL: 250 feet. DRILLER (name): _____
 - (b) SURFACE CASING: Length: _____ feet. Diameter: 8 inches. Type: _____
 - (c) SCREEN: Length: _____ feet. Diameter: 6 inches. Type: _____
 - (d) PUMP: Type: _____ Size: _____ Capacity: 200 gallons per minute.
Number of stages: _____ Setting depth: _____ feet.
 - (e) POWER UNIT: Type: _____ Size: _____ horsepower.
 - (f) TYPE OF COMPLETION: _____

WATER USE DATA:

If for IRRIGATION, FISH CULTURE or any other areal use, show the number of acres to which water will be applied in the appropriate 40-acre block(s). Acreage must be shown on accompanying location map.

TOWN-SHIP	RANGE	SEC-TION	NE1/4				NW1/4				SW1/4				SE1/4				TOTALS
			NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	

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

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

3. MUNICIPAL or WATER ASSOCIATION
Choose "a" or "b". (a) The number of people served is _____. (b) The number of connections/customers 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 years? 142,000 1990; 156,000 1995; 172,000 2000; 189,000 2005
(Volume) (Year) (Volume) (Year) (Volume) (Year) (Volume) (Year)

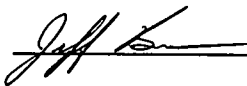
4. INDUSTRIAL: If water is to be released into a watercourse, indicate the amount released each year _____
Rate of release _____; Location of release point in reference to diversion/withdrawal point _____
_____ Explain any change in quality of water to be released: _____
NPDES Permit No. _____
Explain 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: _____

REMARKS: _____

List below the person to be contacted for additional information if required:
Jeff Brown - Alford Engineering
(Name)
P. O. Box 16621
(Address)
Jackson, MS 39236-6621
(City, State, Zip)
601-362-7450
(Telephone)

The accompanying map is hereby declared a part of this application. The TEN DOLLAR (\$10.00) permit fee is enclosed herewith.

(Signature)

Subscribed and sworn to before me this 4th day of October 19 90 at Jackson, Miss.
County of Hinds. My commission expires MY COMMISSION EXPIRES 1-17-91
Rosa H. McCain
Notary Public

Copied

J 29

9-65

Copied

MISSISSIPPI BOARD OF WATER COMMISSIONERS

WATER WELL DRILLERS LOG

Date: 9/27, 1965, Driller: Dean Griner County Copiah

(1) Owner of Land: Gallman Water Assn. Inc. Well #1

(2) Location: 1/4, 13 1/4, Sec. 17 2W T. R.

(3) Topography: (Hilly) (Flat) (Level)

(4) Purpose of Well: (Domestic, Irrigation, Municipal, Industrial, Other)

Table with 3 columns: Description & Color of Materials, Thickness Feet, Depth Feet. Rows include: Top Soil (10/10), Sand + Gravel (121/131), Blue Shale (34/165), SAND (50/215). Additional notes: 40' screen, 8' - Depth 215, 9PM - 150, test yielded 1.62 gpm on Nov 1965.

Information upon completion of well: (1) Diameter inches, (2) Total Depth feet, (3) Water Level 84 feet below top of ground, (4) Cased to, Size, (5) Screen: Size, Length 40, (6) Were any formations sealed against pollution?

If YES depth of formation, Why, Drillers Remarks, Yield in gpm, Size pump, Type power

Mail this copy to Board of Water Commissioners 429 Miss. St. Jackson, Miss.

DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR

PUBLIC SUPPLY WELLS PROJECT

GPS LOG

USER NAME(S): BAR/ORB DATE: 6/14/94

UNIT DEQ #: 82859 FILE #: A061714A

HEALTH DEPT. #: 150004-01 ELEV. 463

USGS #: J-29 OLWR #: 13037

OWNER: Gallman WA

LOCATION: NW/NW/NE S 15 T 1N R 2W COUNTY: Copiah

LOCATION DESCRIPTION: 75' NORTH of E. GALLMAN Rd. BEHIND WA. PLANT,
75' EAST of HWY 51 READING ON WESTSIDE of Pump House

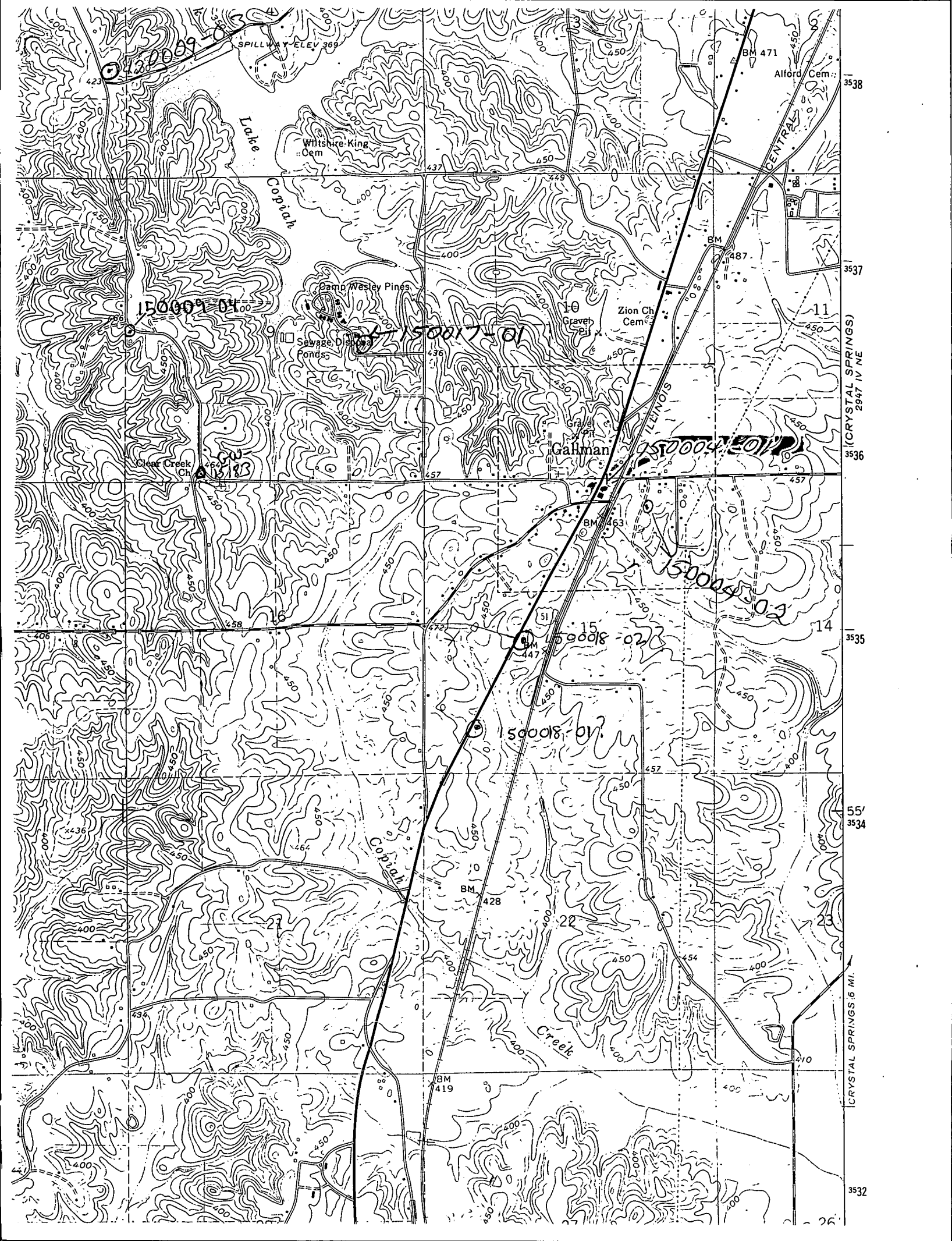
CASING DIA: 8" PUMP TYPE & SIZE: TURBINE 40 HP.

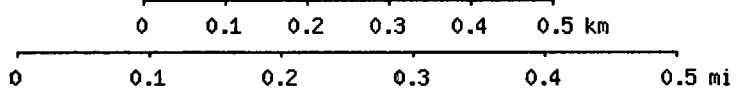
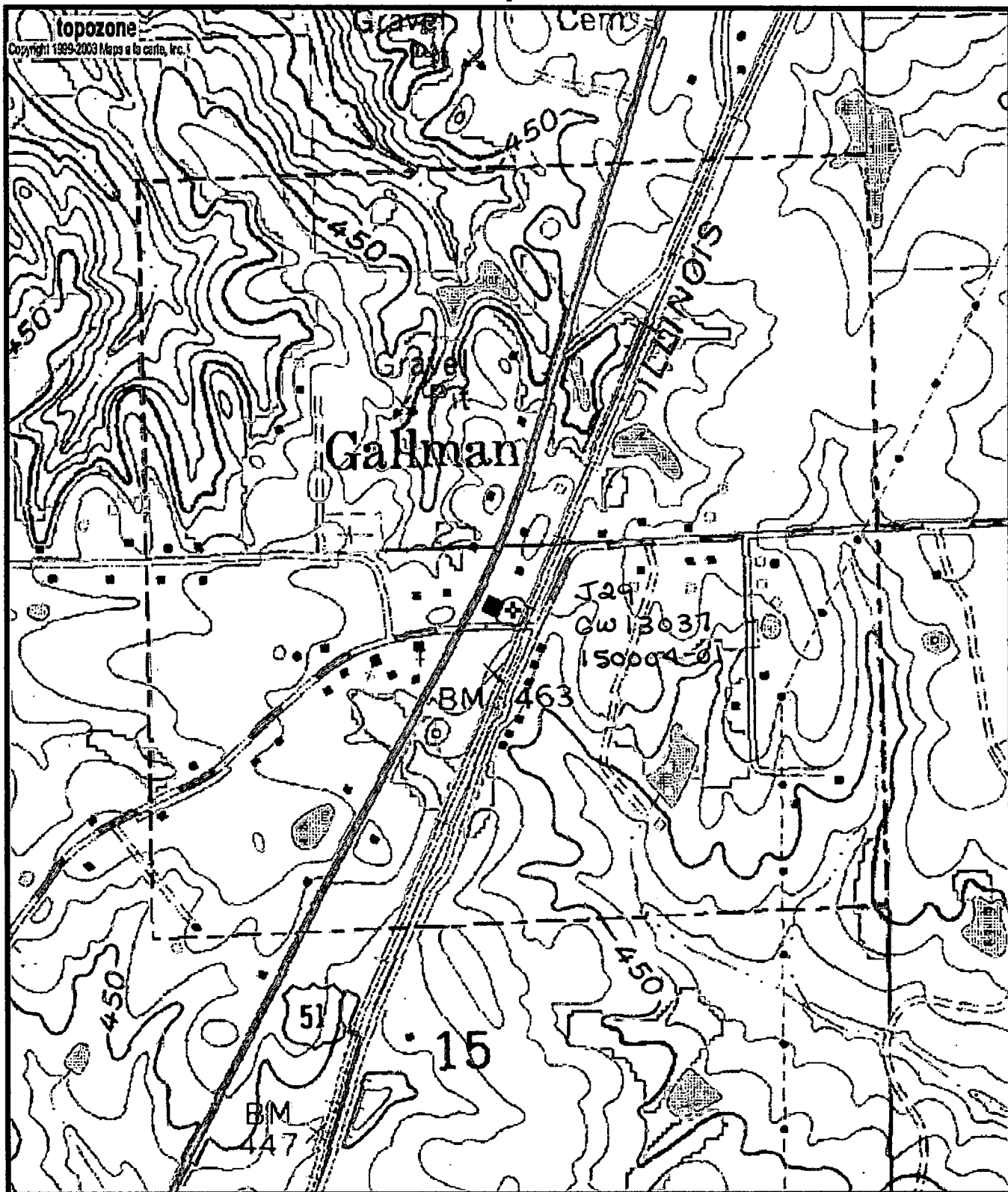
GPS FIELD LOCATION: LAT. 31.5557 LONG. 90.2316

GPS CORRECTED LOCATION: LAT. 31.5556408 LONG. 90.2319371
31.932336 90.388714

REMARKS: _____

Gallman Quad





Map center is 31° 55' 56"N, 90° 23' 19"W (WGS84/NAD83)
Gallman quadrangle - TopoZone Pro elevation display
 Projection is UTM Zone 15 NAD83 Datum

