

GW 8207
015 0007-05

P59

FORM 9-1642
(1-68)

Well No. _____

WELL SCHEDULE

See E-log #64 (P32)

U. S. DEPT. OF THE INTERIOR

GEOLOGICAL SURVEY

WATER RESOURCES DIVISION

PUNCHED and VERIFIED
ROLLA COMPUTATION BRANCH

MASTER CARD

Record by WTR Source of data Bowc Date 2/70 Map Shady Grove
 State 28 County (or town) Copiah Sequential number: 15
 Latitude: 31° 51' 32" N Longitude: 090° 20' 48" W Sequential number: 2
 Lat-long accuracy: 10 T 100 S, R 820 Sec 12 NE, NE, NE & SE/SE/SE
 Local well number: P059AA1210N02W Other number: Shady Grove #1
 Local use: 064064 568 28 Owner or name: _____
 Owner or name: HAZLEHURST Address: _____

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

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

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

DATA AVAILABLE: Well data Freq. W/L meas.: Field aquifer char. Y
 Hyd. lab. data: _____
 Qual. water data; type: _____
 Freq. sampling: _____ Pumpage inventory: yes no; period: _____
 Aperture cards: _____ MOCN yes no
 Log data: See e-log #64 (P32) D E

WELL-DESCRIPTION CARD

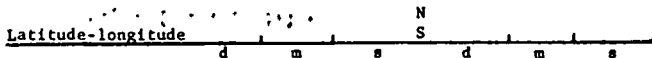
SAME AS ON MASTER CARD Depth well: _____ ft 300 Meas. rept. accuracy 3
 Depth cased: (first perf.) _____ ft 264 Casing type: _____; Diam. 18x8 in 18
 Finish: (C) porous concrete, (F) gravel w. (perf.), (H) gravel w. (screen), (G) horz. gallery, (D) horz. open end, (P) perf., (S) screen, (T) sd. pt., (W) shored, (X) open hole, (B) other S
 Method: (A) air rot, (B) bored, (C) cable, (D) dug, (H) hyd rot., (J) jetted, (P) air percussion, (R) reverse, (T) trenching, (V) driven, (W) drive wash, (B) other A
 Date Drilled: 9/6/6 Pump intake setting: _____ ft _____

Driller: Jayne Central
 Lift (type): (A) air, (B) bucket, (C) cent, (J) jet, (L) multiple (cent.), (M) multiple (turb.), (N) none, (P) piston, (R) rot, (S) submerg, (T) turb, other T Deep Shallow
 Power (type): nat, diesel, elec, gas, gasoline, hand, gas, wind; LP, H.P. 40 Trans. or meter no. _____
 Descrip. MP 425 above ft below LSD, Alt. MP _____

Alt. LSD: 4370 Accuracy: (source) 4
 Water Level: _____ ft above below MP; _____ ft above below LSD 135 Accuracy: 0.2 # A
 Date meas: 8/7/1 Yield: _____ gpm 350 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. 3/19/02 RLB/DC

Well No. _____

P59



HYDROGEOLOGIC CARD

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

Drainage Basin: D **Subbasin:** 134

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 Jm aquifer, formation, group CA

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

Length of well open to: 155 ft **Depth to top of:** 410 ft **Depth to top of:** 240 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:** _____

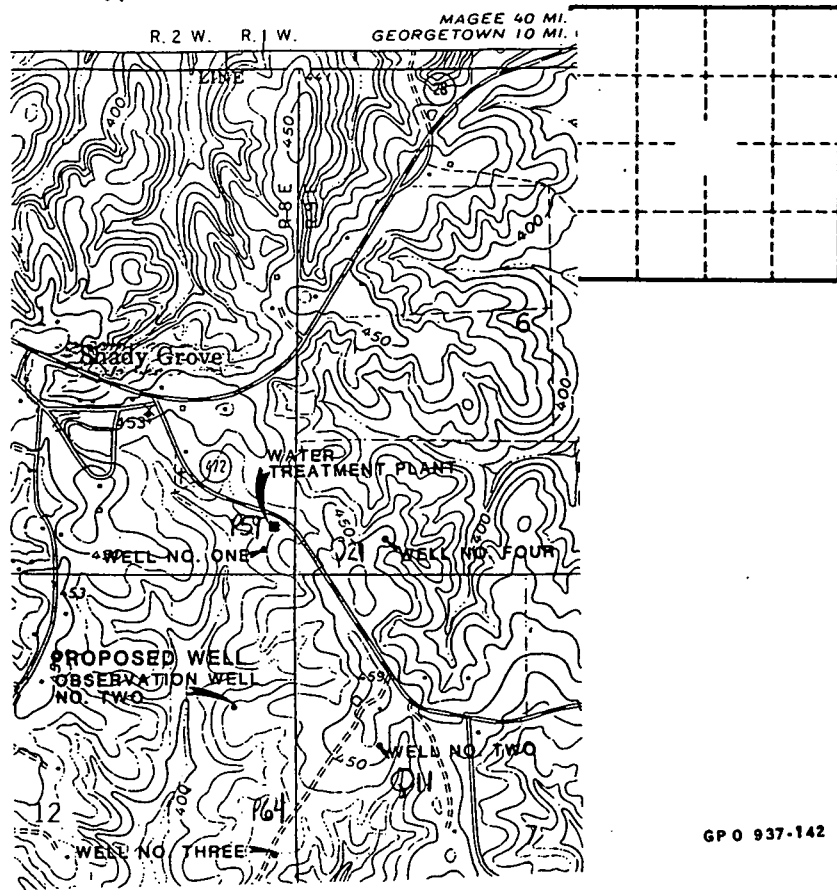
Surficial material: _____ **Infiltration characteristics:** _____

Coefficient Trans: 60,000 gpd/ft **Coefficient Storage:** 0.003 305

Coefficient Perm: 1100 gpd/ft²; **Spec cap:** 28 gpm/ft; **Number of geologic cards:** _____

E-109-141 June 1965

WL = 111 (1968)
 WL = 135' 9/91
 2 1/2' Artesian
 164' pumping level



Well No. P 59

1

[The page contains several paragraphs of text that are almost entirely illegible due to extreme noise and heavy horizontal streaking. Only a few words are faintly visible, such as "THE", "AND", "OF", "BY", "IN", "ON", "TO", "A", "AN", "THE", "AND", "OF", "BY", "IN", "ON", "TO", "A", "AN".]

DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR-
PUBLIC SUPPLY WELLS PROJECT

GPS LOG

USER NAME (S): RLB + DC DATE: March 19, 2002
UNIT DEQ #: _____ FILE #: _____
HEALTH DEPT. #: 15007-05 ELEVATION: _____
USGS #: P59 OLWR #: MS-GW 08207
OWNER: Hazlehurst, Town of QUAD: Shady Grove
LOCATION: _____ S 1 T 10 N R 8 E COUNTY Copiah
LOCATION DESCRIPTION: From inter. of Hy. 28 + Hy 472 go .3 mile
S.E. on Hy. 472 well off right side road
by lake.
CASING DIA: 8" PUMP TYPE & SIZE: Turbine 40 hp.
GPS FIELD LOCATION: LAT. 31.86082 LONG. 90.34692
GPS CORRECTED LOCATION: LAT. _____ LONG. _____
REMARKS: _____

Note: P48 was the test well

perm. 31.860833
-90.346667

**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

This box is for office use only.

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

Issued: <u>3-8-88</u>	Expires: <u>11-12-2007</u>	Fee Paid: <u>X</u>	Permit No.
Lat. <u>315139</u>	Long. <u>902048</u>	Elev. <u>435</u>	USGS No.
Quad <u>SHADY GROVE</u>	ASCS Farm No.	STAC.	MSDOH No. <u>150007-07</u>
Aquifer: <u>MOCN</u>	Tract No.		Basin No. <u>03180003</u>
Remarks:			Dam Inv. No.

THIS APPLICATION IS FOR (Circle one): RENEWAL PERMIT NO. GW-008207

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 HAZLEHURST 64-6000437
(Name) (SSN or Tax ID No.)

P. O. BOX 549
(Address)

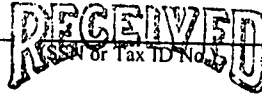
HAZLEHURST, MS 39083 - 0549 (601) 894 - 3131
(City) (State & Zip) (Telephone No.)

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

(Name)

(Address)

(City) (State & Zip) (Telephone) _____



SEP 23 1997

Dept. of Environmental Quality
Office of Land & Water Resources

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

SE NE 1/4 of the SE NE 1/4 of Section 12-1, Township 10-N, Range 8-E, County COPIAH

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-05354; GW-008203; GW-008026; GW-008208; GW-008209; GW-008210

SECTION B (to be completed for GROUNDWATER SOURCE)

1. AQUIFER: MIOCENE MISSISSIPPI DEPARTMENT OF HEALTH NO.: 150007-07 05

2. Proposed work will begin on _____, 19____, and will be completed by _____, 19____
If well has already been drilled, when was well completed (date)? 4-00, 19 66. Under whose name was well originally drilled (if known)? _____

3. Description of proposed or completed well:

(a) DEPTH OF WELL: 300 feet; DRILLER: LAYNE CENTRAL

(b) SURFACE CASING: Length 251 feet; Diameter _____ inches; Type WELDED

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

(d) PUMP: Type RKLC; Size 10"; Capacity 350 gallons per minute; Setting depth 351 feet

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

4. PERMITTED VOLUME:

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

(b) 504 0.21 million gallons per day at a maximum rate of 350 gallons per minute

(CONTINUED ON BACK)

0-397

350

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. Discription 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

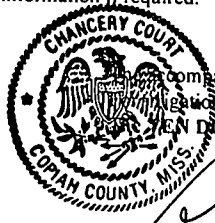
SECTION E WATER USE DATA (ALL APPLICATIONS - complete section related to beneficial use)

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 4,221 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?

<u>1.5 MGD</u>	<u>1997</u>	<u>1.58MGD</u>	<u>2002</u>	<u>1.66 MGD</u>	<u>2007</u>	<u>1.74 MGD</u>	<u>2012</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.

SUE B. BROWN, CITY CLERK
(Name)
P. O. BOX 549
(Address)
HAZLEHURST, MS 39083
(City, State, Zip)
(601) 894-3131
(Telephone)



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

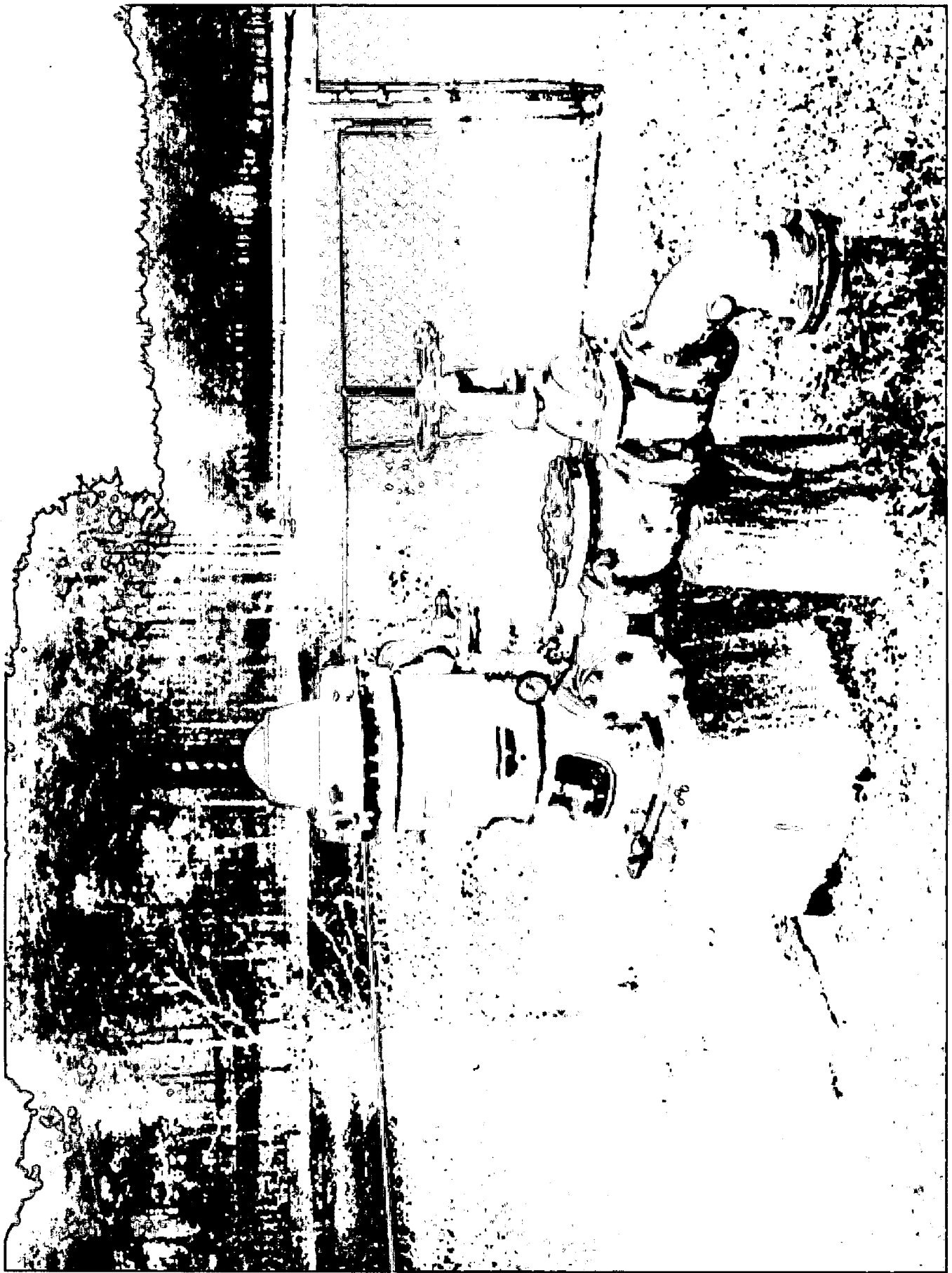
[Signature]
(Signature)

Subscribed and sworn to before me this 18th day of September, 97, at 9:00 a.m. County of Copiah
My commission expires January 1, 2006
Steve Amos Chancery Clerk Notary Public.
By: Kim Wright D.C.

3/2002

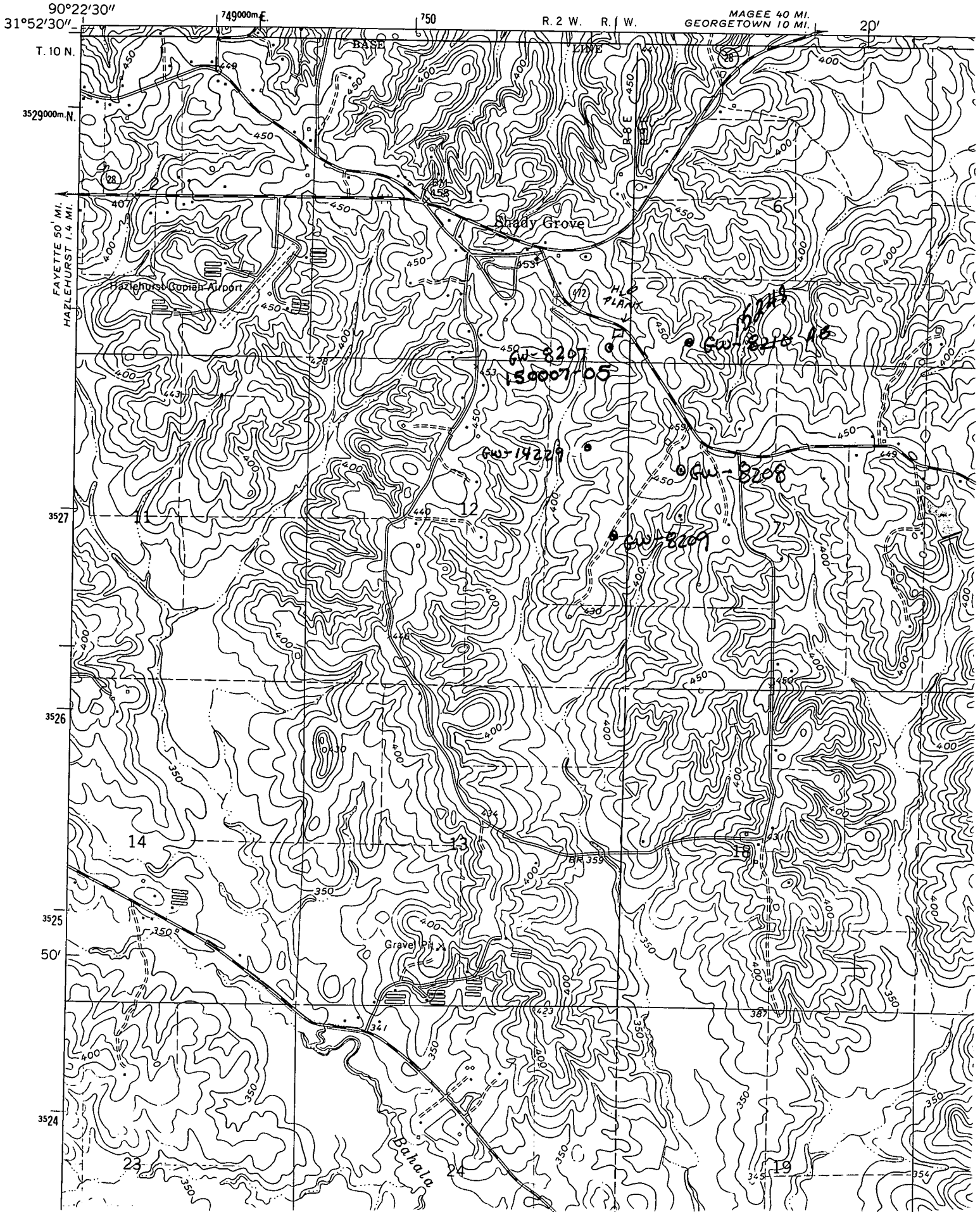
31.86082/90.34692

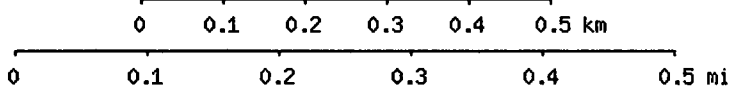
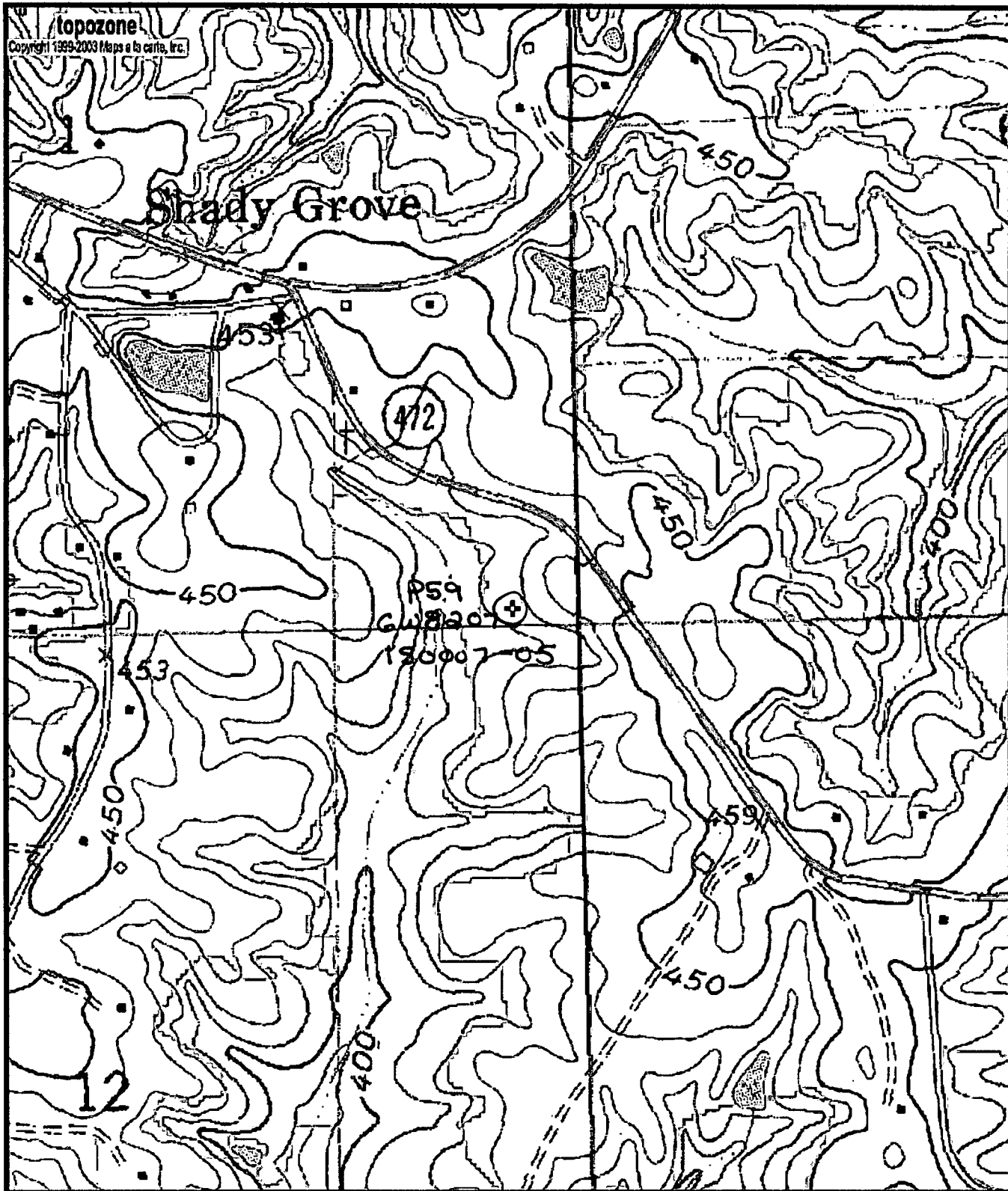
150007-05, 6w-08207
P059



2947 N. NW
(GALLIMAN)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY





Map center is UTM 15 751017E 3528076N (WGS84/NAD83)
Shady Grove quadrangle - TopoZone Pro elevation display
Projection is UTM Zone 15 NAD83 Datum

M=0.714
G=1.401

