

GW 8210 7-08
D150007-08

FORM 9-1642
(1-68)

Well No. Q21

WELL SCHEDULE

Ewg # 224

U. S. DEPT. OF THE INTERIOR

GEOLOGICAL SURVEY

WATER RESOURCES DIVISION

replaced by GW 15248

Abandoned

MASTER CARD

Record by Q Source of data MGS Date 8/74 Map Shady Grove

State Ms. 218 County (or town) Copiah 15

Latitude: 315140N Longitude: 0902042 Sequential number: 1

Lat-long accuracy: 2 100 9 6 NW SE SW NE

Local well number: 0021C0610N01W Other number: #7 B & M

Local use: 184224 Owner or name: HAZLEHURST Address: _____

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

Use of water: (A) Air cond, (B) Bottling, (C) Comm, (D) Dewater, (E) Power, (F) Fire, (G) Dom, (H) Irr, (I) Med, (J) P S, (K) Rec, (L) Stock, (M) Instit, (N) Unused, (O) Reppure, (P) Recharge, (Q) Desal-P S, (R) Desal-other, (S) Other AB P

Use of well: (A) Anode, (B) Drain, (C) Seismic, (D) Heat Res, (E) Obs, (F) Oil gas, (G) Recharge, (H) Test, (I) Unused, (J) Withdraw, (K) Waste, (L) 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: _____ MOCN yes no

Log data: Ewg 2'-35' D.E

WELL-DESCRIPTION CARD

SAME AS ON MASTER CARD Depth well: 312 Meas. rept accuracy 3

Depth cased; (first perf.) 272 Casing type: _____; Diam. 16x8 in 16

Finish: porous concrete, gravel w. concrete, (perf.), (screen), (H) gravel w. (screen), (I) horiz. gallery, (J) open end, (K) perf., (L) screen, (M) sd. pt., (N) shored, (O) open hole, (P) other S

Method Drilled: (A) air rot, (B) bored, (C) cable, (D) dug, (E) hyd rot., (F) jetted, (G) air percussion, (H) reverse, (I) rotary, (J) trenching, (K) driven, (L) drive wash, (M) other H

Date Drilled: 6-17-74 9:7:4 Pump intake setting: _____ ft _____

Driller: Griner Drig. Sew.

Lift (type): (A) air, (B) bucket, (C) cent, (D) jet, (E) multiple, (F) multiple, (G) none, (H) piston, (I) rot, (J) submerg, (K) turb, (L) other T Deep Shallow

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

Descrip. MP 420 440 ft above below LSD, Alt. MP _____

Alt. LSD: 435 Accuracy: (source) topo 4

Water Level: _____ ft above below MP; _____ ft above below LSD 151 Accuracy: _____ D

Date meas: 074 Yield: _____ gpm _____ 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. _____

Latitude-longitude _____

HYDROGEOLOGIC CARD

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

D Drainage Basin: 13V Subbasin: _____

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

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

Lithology: _____ Origin: S _____ Aquifer Thickness: 45 ft

Length of well open to: _____ ft 40 Depth to top of: _____ ft 26.5

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: _____

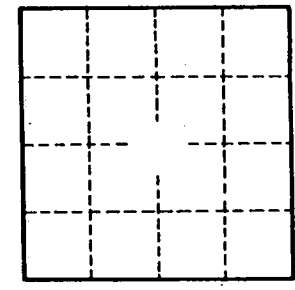
Coefficient Trans: _____ gpd/ft _____ Coefficient Storage: _____

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

WL=145' 9/13/91

20' Air line

Sand med 262'-313'



Well No. _____

COPIA#
 Q 21
 10/74
 E Log # 224

08210

MISSISSIPPI
 BOARD OF WATER COMMISSIONERS
 416 North State Street
 Jackson, Mississippi 39201

CODED

WATER WELL DRILLERS LOG

OCT 19 74 GRINER DRILLING SER. COPIA#
 date well completed firm name county well located

LANDOWNER: CITY OF HAZLEHURST #4 WELL
 (mailing address)
 WELL LOCATION: NE 1/4 SW 1/4
sec. 6 T. 10 N. R. 1 E. S. 5 W.
 (distance) miles (direction) of (nearest town)

description of formations encountered	from	to
TOP SOIL	0	3
SANDY CLAY	3	4
SAND	4	32
CLAY	32	126
SAND with CLAY streak	126	188
CLAY	188	262
SAND, Medium	262	313
CLAY	313	360

WELL PURPOSE:
 (home, irrigation, municipal, industrial)

WELL COMPLETION DATA:
 (1) diameter (inches) 16"
 (2) total depth (feet) 312'
 (3) static water level (feet) 151' below above top of ground.
 (4) casing B.I. 258'
 (material) (depth)
16" if telescope see back.
 (size)
 (5) screen 40' 272'
 (length) (depth to top)
8" 304 S.S.
 (size) (material)
 (6) pump _____ (HP) _____ (yield gpm)
Elect.
 (type power)
 (7) electric log Yes
 (yes or no)
MGS
 (organization running log)
 (8) how well bottom plugged BACK
WASH VALVE

CODED

DRILLERS REMARKS:

OCT 24 1974
 MISS. BD. OF WATER COMMISSIONERS

REPLACED BY GW-15248

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 CASING IS LARGER.

This box is for office use only. FORM OI.WR-AP-2 (REV. 9/94)

Table with 4 columns: Issued, Expires, Fee Paid, Permit No., Lat., Long., Elev., USGS No., Quad., ASCS Farm No., STAC., MSDOH No., Aquifer, Tract No., Basin No., Remarks, Dam Inv. No.

THIS APPLICATION IS FOR (Circle one): NEW PERMIT RENEWAL - PERMIT NO. GW-008210

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

Fee for this well will apply

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: 15248

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 (City) (State & Zip) (601) 894 3131 (Telephone No.)

APPLICANT, AGENT, OR LESSEE (if different from landowner)

RECEIVED

SEP 23 1997

(Name) (SSN or Tax ID No.)

Dept. of Environmental Quality Office of Land & Water Resources

(Address)

(City) (State & Zip) (Telephone)

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

NW 1/4 of the NW 1/4 of Section 7, Township 10-N, Range 9-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-008206; GW-008207; GW-008208; GW-008209

SECTION B (to be completed for GROUNDWATER SOURCE)

1. AQUIFER: MIOCENE MISSISSIPPI DEPARTMENT OF HEALTH NO.: 15-0007-08

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

If well has already been drilled, when was well completed (date)? 10-00, 1974 Under whose name was well originally drilled (if known)?

3. Description of proposed or completed well:

(a) DEPTH OF WELL: 312 feet. DRILLER: GRINDER

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

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

(d) PUMP: Type RKL; Size 10"; Capacity 350 gallons per minute; Setting depth 234 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 million gallons per day at a maximum rate of 350 gallons per minute

(CONTINUED ON BACK)

MAP SENT

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

- Source of water is from _____ which drains into _____
which drains into _____
(major stream or river)
- Description of pump/diversion works:
Pump (size & type): _____ Power Unit (size & type): _____
Lift: _____ feet Maximum capacity: _____ gallons per minute
- _____ 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)

- Name of storage reservoir: _____ Dam Height: _____ feet
- 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)

- 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 _____

- Method of Irrigation (circle one) - Center Pivot Flood Furrow
- Land Condition (circle one) - Precision Land Formed Smoothed
- ASCS Farm No. _____ Tract No. _____

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

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?

1.5 MGD	1997	1.58 MGD	2002	1.66 MGD	2007	1.74 MGD	2012
(Volume)	(Year)	(Volume)	(Year)	(Volume)	(Year)	(Volume)	(Year)

- 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? _____

- RECREATION:** Explain how water will be used: _____

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

- REMARKS:** _____

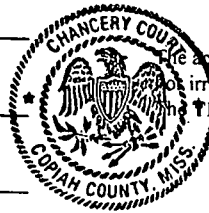
List below the person to be contacted for additional information if required.

SUE B. BROWN, CITY CLERK
(Name)

P.O. BOX 549
(Address)

HAZLEHURST, MS 39083
(City, State, Zip)

(601) 894-3131
(Telephone)



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

[Handwritten Signature]
(Signature)

Subscribed and sworn to before me this 10th day of September, 1997, at 9:00am County of Copiah

My commission expires MISSION EXPIRES JAN. 1, 2000
By: Steve Amos Chancery Clerk, Notary Public.

By: Kim Wright D.C.

DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR
PUBLIC SUPPLY WELLS PROJECT

GPS LOG

USER NAME(S): LIAR/DKB DATE: 6/16/94
UNIT DEQ #: 82859 FILE #: A061614Q
HEALTH DEPT. #: 150007-08 & -11 ELEV. 440
USGS #: Q-21/Q25 OLWR #: GW-8210 AB / ^{GW-}15248
OWNER: Hazlehurst, Town of
LOCATION: SE/SW/SW S 7 T 10N R 9E COUNTY: Copiah
LOCATION DESCRIPTION: go 1.2 miles E. on gravel drive, well
on N. side, IN FENCED AREA
CASING DIA: _____ PUMP TYPE & SIZE: Turbine / 40
GPS FIELD LOCATION: LAT. 31-51-43 LONG. 90-20-33
GPS CORRECTED LOCATION: LAT. 31.5142.827 LONG. 90.20.34.454
REMARKS: .6 mile S on ^{31.861896} 472E ^{90.342907} Left side of ROAD off
Shady Grove Road

Shady Grove
Hazlehurst Quad
Q25 is the -11 well
Q21 is the -08 well
using same lat/long for both

Q21 was abandoned.
I think the -08 tag
was moved to Q25.

Redone 3/19/02 RLB/DC

-08 31.86196 90.34293 -11 31.86180 90.34306

3/1002

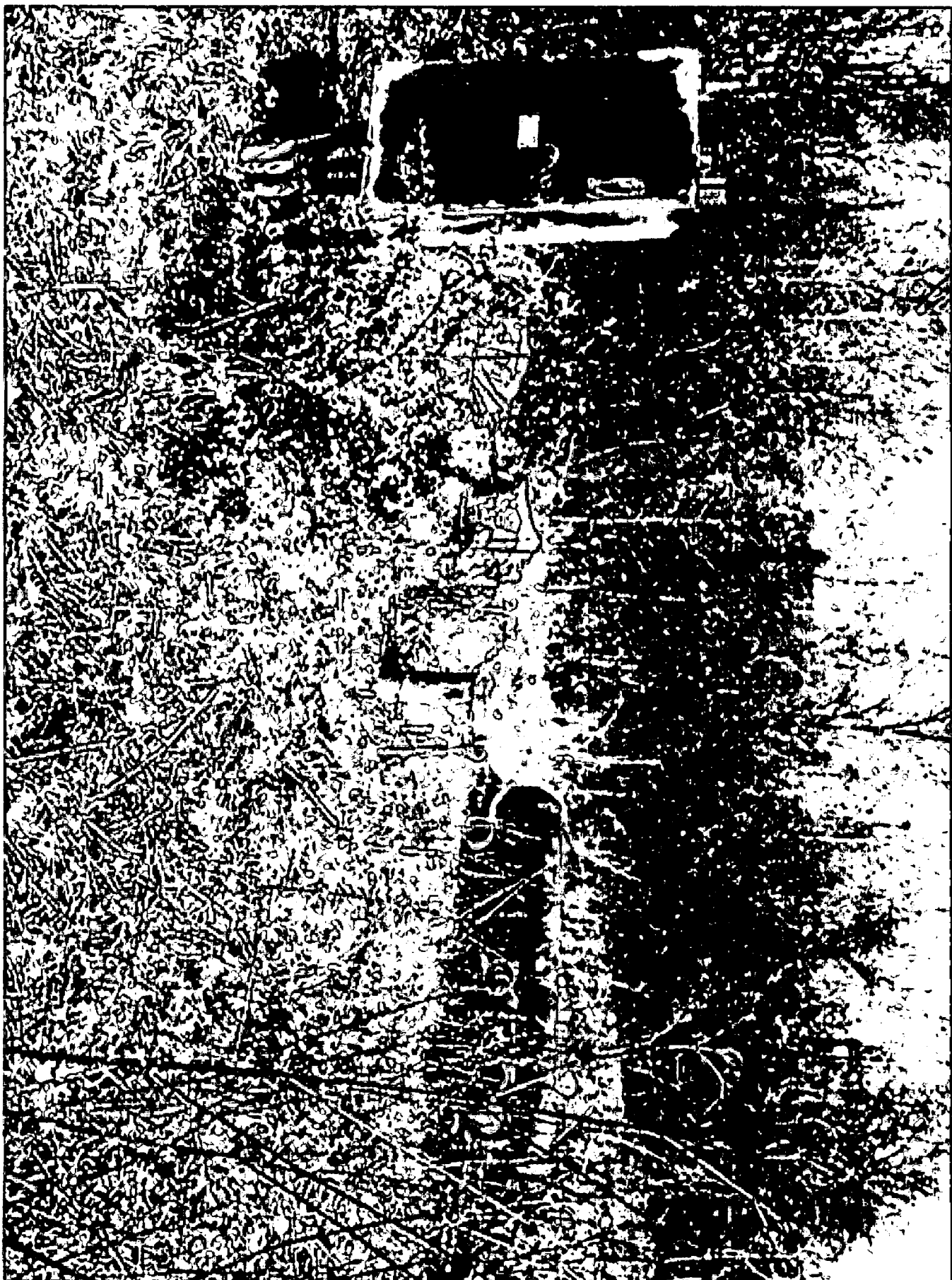
31.86191 / 90.34293

150007-08,

GW-09210,

9021

1409 cmh.



FAYETTE 50' MI.
HAZLEHURST 1.4 MI.

Hazlehurst Copiah Airport

Shady Grove

Bobo 1-06

Gravel Pit

Behold

2947 IV SW
(HAZLEHURST)

3527
3526
3525
50'
3524
3523

14

23

354

377

