



MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

WELL SCHEDULE

FIPS: 33

WELL: A107

LOG NO.:

Recorded by: PPhillips Data Source: Driller's log Date: 2/17/05

County: De Soto Permit No.: Gw12964 DOH No.: 0170043-02

Quad: Horn Lake Elevation: 304

1/4: SW 1/4: SE 1/4: SW Sec.: 25 T: 1S R: 9W

Plotted on quad?: In field? From drillers log? From permit?

Latitude: Longitude: GPS? 5HB/PEG 8/21/96 From Quad?

Primary aquifer: SPRT Secondary aquifer:

Use: WA Well status: AB- Local well name:

Owner: Walls Water Association, Inc.

Date completed: 9/1/85 Driller: Wilson Well Co. Well depth: 440 Hole Depth: 440

Pump type: S Power type: E Pump capacity: HP:

Casing interval: 0-359 Casing length: 359' Casing diameter: 6" Casing type: PVC

Casing interval: 300-364 Casing length: 64' Casing diameter: 4" Casing type: S

Screen interval: 364-404 Screen length: 40' Screen diameter: 4" Screen type: SS

Screen interval: Screen length: Screen diameter: Screen type:

Type of logs: Log interval:

Initial water level: 114 Date: 9/1/85 M.P. description:

Water Quality Data? Source: Reliability:

Water Level Data? Source: Reliability:

Pump Test Data? Source: Reliability:

Water Use Data? Source: Reliability:

Water level data

This area for location map and notes

Revised

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Office of Land and Water Resources

P. O. Box 10631
Jackson, MS 39289-0631
WATER WELL DRILLERS LOG

COUNTY WELL LOCATED	Desoto
WELL NUMBER	A-1071
CODED	
DATE WELL COMPLETED	Sept 85'

PERMIT NUMBER	MSGW-129164
NAME OF DRILLING FIRM	Wilson Well Co Inc

NAME & MAILING ADDRESS OF LANDOWNER

Lake Forest Water Plant

WAIS Water Assn

Latitude:

Longitude:

WELL LOCATION	SEC	TOWNSHIP	RANGE
		N 9 E	

DISTANCE _____ MILES _____ of _____

DIRECTION _____ NEAREST TOWN _____

OTHER LANDMARK _____

WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.

Water Assn

PUMP DATA

PUMP TYPE (Circle One):
 Submersible Turbine Jet Flowing Well.
 Other (Describe) _____

POWER TYPE (Circle One):
 Electric Tractor Diesel Gasoline Butane.
 Other (Describe) _____ H/P _____

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO
Red Clay	5	45
Sand	45	65
White Clay	65	75
White coarse sand	75	85
PCA Gravel	85	90
Yellow Clay	90	100
Yellow Clay + Lignite	100	120
Yellow Clay - Shell Duck	120	130
Yellow Clay Soft	130	140
Blue Clay med	140	162
Blue Clay Hard	162	174
Blue Clay med	174	180
Blue Clay Hard	180	204
Blue Clay med + Hard	204	240
Sand	240	270
Sand w/ Clay streaks	270	296
Sand	296	440

Top of Lap Pipe or Reduction in Casing _____ FEET

IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE

WELL DATA

Well Depth	Casing Diameter (in.)	Casing Length (ft.)
440	6	359

Type of Casing	Motor Depth	Depth to Static Water Level
PVC 40 Sch 40	440	114

TYPE OF COMPLETION: (Circle One or More):
 Gravel Pack Underreamed Telescoped.
 Natural Development Open Hole Other

WELL GROUTED TO A DEPTH OF _____ FEET
 Type Grout (circle one): Cement Bentonite or Mix

SCREEN DATA

Diameter - inches	Length - Feet	Slot Size - inches
4"	40	1030

Screen Type: 304 S/S w/ mesh

Depth to Bottom - Feet: 404

I certify that the well was drilled, constructed and completed in accordance with all applicable Requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.

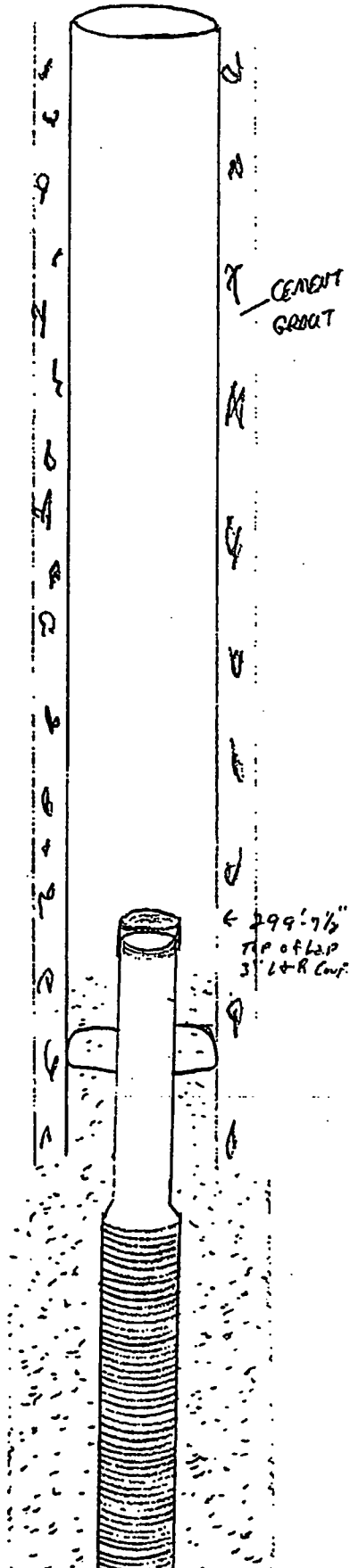
Revised 10-9-02

Reg. D. Will 0-418
Signature of Licensed Driller and License No.

Date

Additional Information Required On Back

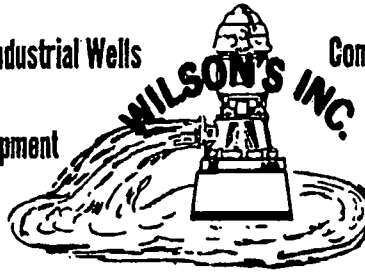
DRAWING OF THE WELL



Municipal - Industrial Wells

Complete Repair Service

Pumping Equipment



Chemical Treating

NEW CASTLE

RT. 2, WHITEVILLE, TENN. 38075

Ph. 901-254-8010

WELL CONSTRUCTION DATA

CONTRACT NO. _____ - _____

OUR WELL NO. 1 THEIR WELL NO. 2 IN TEST HOLE NO. 1

LOCATION OF THE WELL Lake Forrest Water Plant

INSTALLED FOR City of Wells

ADDRESS CITY Wells COUNTY DeSoto STATE Miss

WELL DATA

STARTED WELL 8-5- 1985 AND COMPLETED 19

TOTAL DEPTH 404'-2 1/2" ELEVATION _____ STATIC WATER LEVEL 112' - Ground Level

LENGTH SURFACE CASING _____ SIZE _____ THICKNESS _____

CEMENTED WITH _____ SACKS CEMENT TYPE PACKER _____

LENGTH WELL CASING 359' (G.D.) SIZE 6" WEIGHT 56# #40

CEMENTED WITH _____ SACKS CEMENT TYPE PACKER _____

INNER CASING LENGTH 63' SIZE 3" WEIGHT STD.

WITH 3 x 6 GUIDES LOCATED 339' TYPE SACKOFF _____

LEAD SEAL _____ BACKPRESSURE VALVE Yes GUIDE 4"x16" at Bottom

WELL STRAINER MAKE Howard Smith SIZE 4" LENGTH 40' OPENING .030

TYPE MATERIAL 304-S.S. WITH M+FeM CONNECTIONS _____

SIZE HOLE DRILLED FOR SURFACE CASING _____ WITH _____

SIZE HOLE DRILLED FOR WELL CASING 11 WITH Drag

SIZE HOLE DRILLED FOR STRAINER 16" WITH 4R.

YARDS OF GRAVEL USED 3 HOW PLACED _____

HOW WAS WELL DEVELOPED Flr

NOTES: 4" S.S. Wire Wrap Screen - 4"x3" Swage Nipple - 3" Steel
L2P Pipe - 3" L+R Coupl. on Top 299'-7 1/2" Ground Level

RIG USED 1500 - G.D. DRILLER Watson - Lax

GENERAL

PURPOSE FOR WHICH THIS WATER IS USED _____

TEMPERATURE _____ IS WATER CLEAN _____ CAPACITY _____

SAND _____ HARDNESS _____ PH _____ IRON _____ N & CL _____

TYPE TREATMENT USED _____

IS THERE A DERRICK OVER THE WELL _____ HEIGHT _____ TYPE _____

CAN TRUCK OR RIG EASILY GET TO WELL _____

PUMP HOUSE _____ SIZE MATCH _____

REMARKS _____

A24 A107

Issued: <u>9-8-92</u>	Expires: <u>9-8-2002</u>	Fee Paid	Permit No. <u>GW-12964</u>
Lat. <u>34-57-45</u>	Long. <u>90-06-26</u>	Elev. <u>310</u>	USGS No.
Quad. <u>HORN LAKE</u>	Dist.		Basin No. <u>08010211</u>
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

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

RECEIVED
AUG 18 1990
fee paid

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

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

LANDOWNER:

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

(Address) _____

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

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

Walls Water Assn. _____ 59-1400103
(Name) _____ (S/S or Tax ID No.) _____
P.O. Box 216

(Address) _____

Walls _____ MS 38680 (601) 781-3722
(City) _____ (State and Zip) _____ (Telephone Number) _____

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

SE 1/4 of the SW 1/4 of Section 25, Township 1 S, Range 9 W, County DeSoto

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) 0.00 million gallons per day at a maximum rate of 1200 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) _____, 19____ and will be completed by (date) _____, 1993

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.
1 other well AD # 170043-02

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 #3 WELL aquifer.
2. Description of proposed water well:
- (a) DEPTH OF WELL: ~~450~~ 150 feet. DRILLER (name): CARLOSS WELD CO
- (b) SURFACE CASING: Length: ~~140~~ 150 feet. Diameter: 12 inches. Type: STEEL
- (c) SCREEN: Length: ~~80~~ 80 feet. Diameter: 8 1/2 inches. Type: STAINLESS STEEL
- (d) PUMP: Type: TORBI. Size: 8 1/2. Capacity: 1200 gallons per minute.
 Number of stages: 10 Setting depth: 260 feet.
- (e) POWER UNIT: Type: ELEC. Size: 15 H.P. 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	SECTION	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? _____ (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:

(Name) _____
 (Address) _____
 (City, State, Zip) _____
 (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 _____ day of _____ 19____, at _____
 County of _____ My commission expires _____
 _____, Notary Public

DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR
PUBLIC SUPPLY WELLS PROJECT

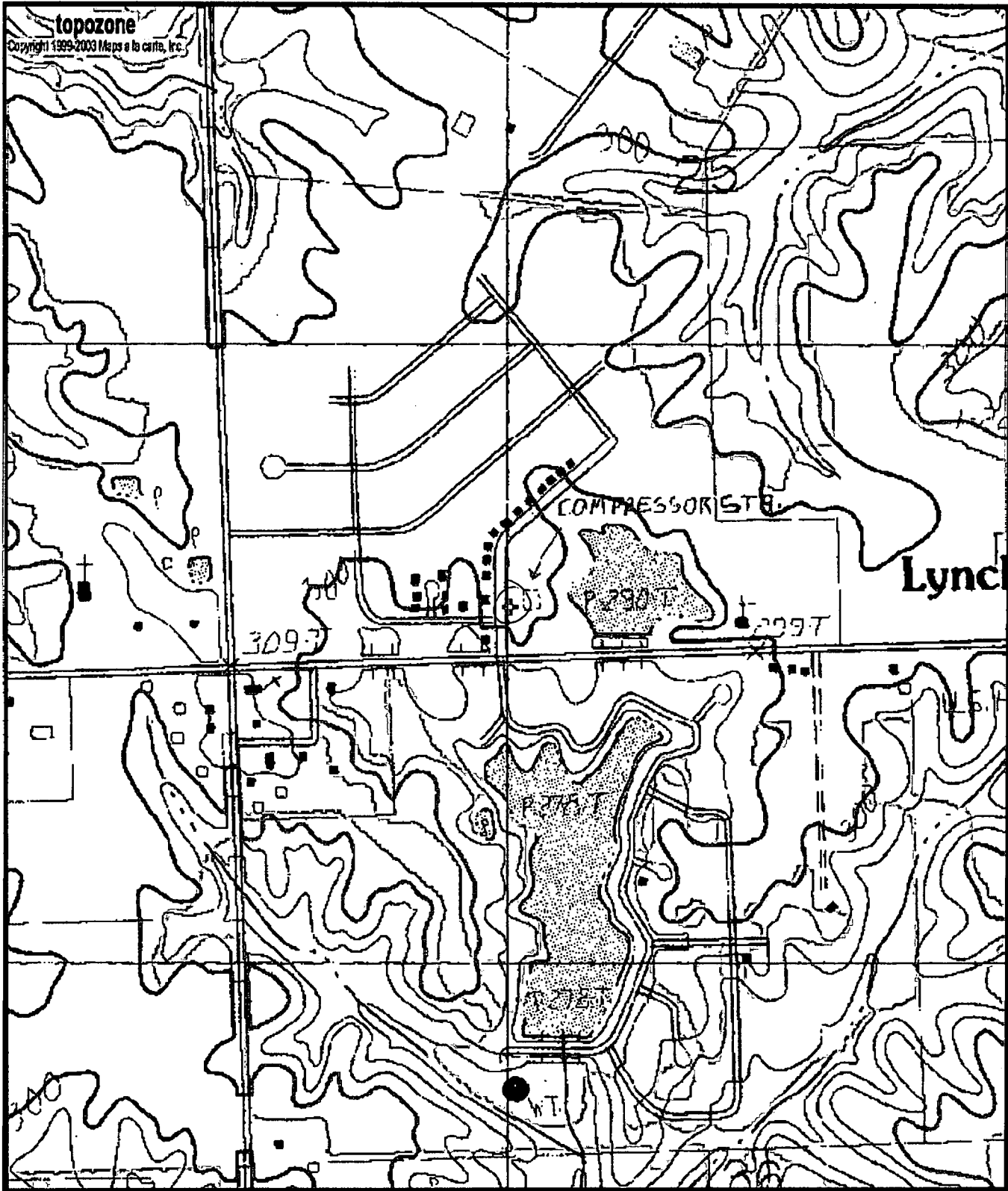
GPS LOG

USER NAME(S): SHD + PEG LAVE/BREB DATE: 8-21-96
7/30/96
UNIT DEQ #: _____ FILE #: 8072619E
A082114D
HEALTH DEPT. #: *170043-02 ELEV. 308
USGS #: ~~A107~~ A107 OLWR #: GW12964
OWNER: Walls Water Assoc. Forest Lake
LOCATION: SW/SE/SW S 28 T 15 R 9W COUNTY: DESOTO
Horn Lk. Quad
LOCATION DESCRIPTION: Deat well...

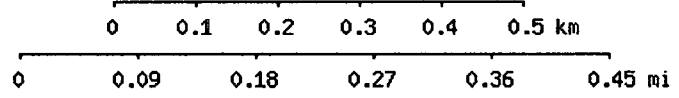
CASING DIA: 6 PUMP TYPE & SIZE: (Sub.)
Tubing 544
GPS FIELD LOCATION: LAT. 34.58144N LONG. 90.05452W
34° 59' .811" 90° 06' .518"
GPS CORRECTED LOCATION: LAT. 34.96336897 LONG. 90.10884244

REMARKS: SEE WELL #1

X



0170043-02
 6W12964
 A107



Map center is 34° 57' 48"N, 90° 06' 32"W (WGS84/NAD83)
Horn Lake quadrangle
 Projection is UTM Zone 15 NAD83 Datum

