

WELL SCHEDULE

30B

U. S. DEPT. OF THE INTERIOR GEOLOGICAL SURVEY WATER RESOURCES DIVISION

MASTER CARD

Record by J.S. Source of data Bowc Date 1/70 Map Olive Branch

State 07 28 County DeSoto 17
(or town)

Latitude: 34^{deg} 57^{min} 20^{sec} N Longitude: 08^{degrees} 9^{min} 50^{sec} W Sequential number: 7

Lat-long accuracy: 4^{deg} 1^{min} 0^{sec} R 60^{sec} 33 NE SW SE/NW/SE
Local well number: 0015A C3301 S06W Other number: _____

Local use: 064 Owner or name: OLIVE BRANCH Address: _____

Ownership: County (C) Fed Gov't (F) City, Corp or Co (M) Private (N) State Agency (P) Water Dist (S) M

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

Hyd. lab. data: _____

Qual. water data; type: SPRT

Freq. sampling: Pumpage inventory: yes no; period: _____

Aperture cards: _____ yes

Log data: D

WELL-DESCRIPTION CARD

SAME AS ON MASTER CARD Depth well: 399 ft Meas. 3

Depth cased: 349 ft Casing type: Steel; Diam. 12 in

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

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

Date Drilled: 969 Pump intake setting: _____ ft

Driller: Layne Central Co, Memphis Tenn

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): (A) diesel, (B) elec, (C) gas, (D) gasoline, (E) hand, (F) gas, (G) wind; (H) P. 75 V Trans. or meter no. _____

Descrip. MP 413 ft above below LSD, Alt. MP _____

Alt. LSD: 380 Accuracy: 3

Water Level: 156 ft above below MP; Ft below LSD 156 Accuracy: D

Date meas: 069 Yield: 500 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 10 6 Temp. _____ °F Date sampled _____

Taste, color, etc. _____

TRANSMITTED FOR ADP

Well No.

D15

TRANSMITTED FOR ADS

Well No. D 15

Latitude-longitude _____ N
_____ S
d m s d m s

HYDROGEOLOGIC CARD

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

D Drainage Basin: 15E Subbasin: _____

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

MAJOR AQUIFER: _____ system _____ series TE _____ aquifer, formation, group SS

Lithology: _____ US Origin: _____ 2 Aquifer Thickness: 2.35 ft

Length of well open to: _____ ft 5.0 Depth to top of: _____ ft 1.3.0

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: 10" SS Keystone .012 SS

Depth to consolidated rock: _____ ft _____ Source of data: _____

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

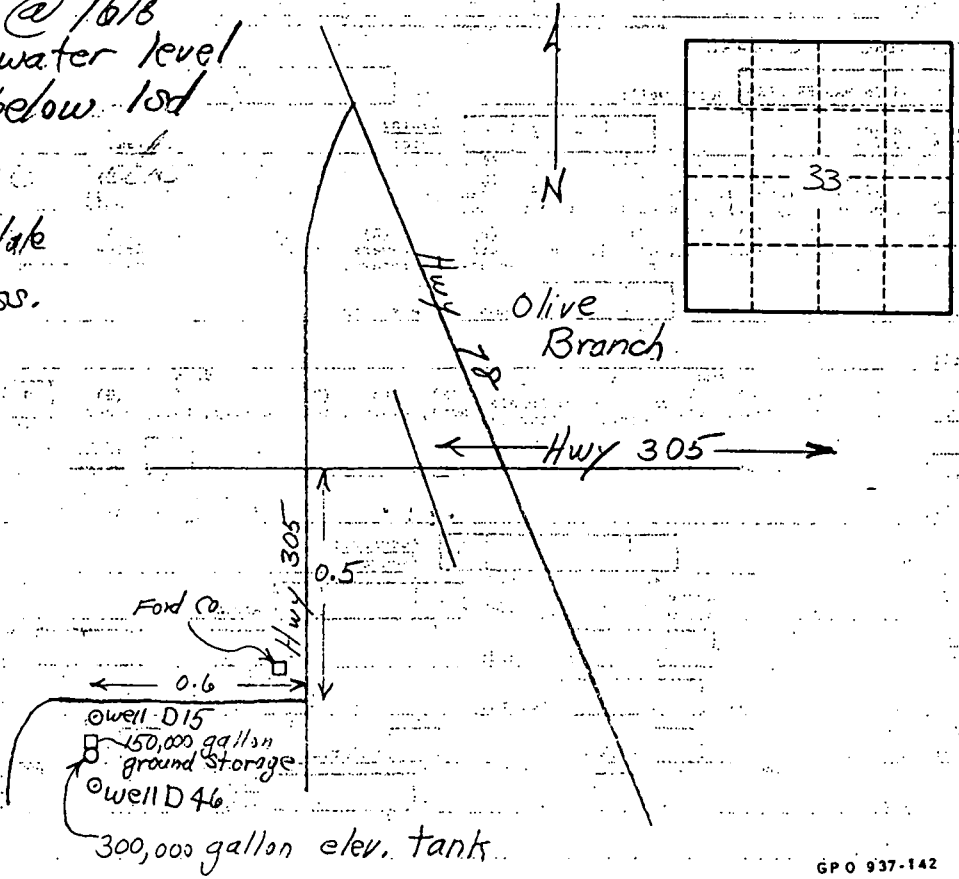
Surficial material: _____ Infiltration characteristics: _____

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

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

5-16-74 @ 1615
measured water level
157' below 1st

Eng., Lauderdale
Hernando, Miss.



DeSoto
 D 15
 12-2-69
 G^w 0/bb3

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

CODED

WATER WELL DRILLERS LOG

12-2-1969 Layne-Central Co. DeSoto
 date well completed firm name county well located

LANDOWNER:	description of formations encountered	from	to
City of Olive Branch			
Olive Branch, Mississippi (mailing address)	Sand and gravel	30	5'
	Rock	58	6'
WELL LOCATION:	Clay	62	13'
sec 33 T 1 N 5 R 6 W	Sandy clay	130	19'
	Sand	190	40'
(distance) miles (direction) of (nearest town)	Fine sand & clay	407	42'
WELL PURPOSE: municipal (home, irrigation, municipal, industrial)			
WELL COMPLETION DATA:			
(1) diameter (inches) 12"			
(2) total depth (feet) 405'			
(3) static water level (feet) 156' below above top of ground.			
(4) casing steel, 350' (material) (depth)			
12" (size) if telescope see back.			
(5) screen 50', 349' (length) (depth to top)			
10" stainless keystone (size) (material)			
(6) pump 75 500 (HP) (yield gpm)			
electric (type power)			
(7) electric log no (yes or no)			
(organization running log)			
(8) how well bottom plugged			
DRILLERS REMARKS:			

CODED

RECEIVED

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

AUG 23 1995

DEPARTMENT OF ENVIRONMENTAL QUALITY, OFFICE OF LAND AND WATER RESOURCES

P.O. BOX 10631, JACKSON, MS 39289-0631; (601) 961-2900

Department of Environmental Quality Office of Land & Water Resources FORM OLWR-AP-2 (REV. 9/94)

This box is for office use only. 10-1095 AGN.

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. MS-GW-01663

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 OLIVE BRANCH 64-6001544 (Name) (SSN or Tax ID No.) 9189 PIGEON ROOST AVE (Address) OLIVE BRANCH MISS 38654 (601) 895-3166 (City) (State & Zip) (Telephone No.)

APPLICANT, AGENT, OR LESSEE (if different from Landowner): SAME (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): NW 1/4 of the SE 1/4 of Section 33, Township 1S, Range 6W, County DeSOTO

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.

SECTION B (to be completed for GROUNDWATER SOURCE)

1. AQUIFER: MEMPHIS Spm/A MISSISSIPPI DEPARTMENT OF HEALTH NO.: 2. Proposed work will begin on 19 and will be completed by 19 If well has already been drilled, when was well completed (date)? Dec. 2, 1969 Under whose name was well originally drilled (if known)? City of Olive Branch 3. Description of proposed or completed well: (a) DEPTH OF WELL: 409 feet. DRILLER: Layne - Bowler, Memphis TN (b) SURFACE CASING: Length 350 feet; Diameter 12 inches; Type Steel (c) SCREEN: Length 50 feet; Diameter 10 inches; Type Stainless Steel (d) PUMP: Type TF 818; Size 75 HP; Capacity 750 gallons per minute; Setting depth 230 feet (e) POWER UNIT: Type Elec; Size 75 HP 4. PERMITTED VOLUME: (a) 0.22 acre-feet per year at a maximum rate of 51 gallons per minute (b) 0.22 million gallons per day at a maximum rate of 750 gallons per minute

(CONTINUED ON BACK)

Handwritten notes: 0.46, 51, 22

Handwritten note: 750

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
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. _____
- 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 2000 of (b) The number of connections is 500
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)
0.25	2000	0.30	2005	0.35	2010	0.40	2015
- 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.

JOSEPH F. LAUDERDALE P.E.
(Name)
9123 Pigeon Roost
(Address)
OLIVE BRANCH, MISS. 38654
(City, State, Zip)
601-895-0422
(Telephone)

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.

[Signature]
(Signature)

Subscribed and sworn to before me this 14th day of August, 1995, at Olive Branch County of DeSoto
My commission expires My Commission Expires April 13 1998 Joyce Harris Notary Public.

DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR
PUBLIC SUPPLY WELLS PROJECT

GPS LOG

USER NAME(S): SHB + PEG
~~LAR/DREB~~ ✓ DATE: 7-24-96
~~7/27/94~~
UNIT DEQ #: 84090 FILE #: 80727188
HEALTH DEPT. #: 120015-02 ELEV. 380^{0072422A}

USGS #: DIS OLWR #: 61101663

OWNER: City of Olive Branch

LOCATION: SW/NW/SE S 33 T 15 R 6W COUNTY: DeSoto

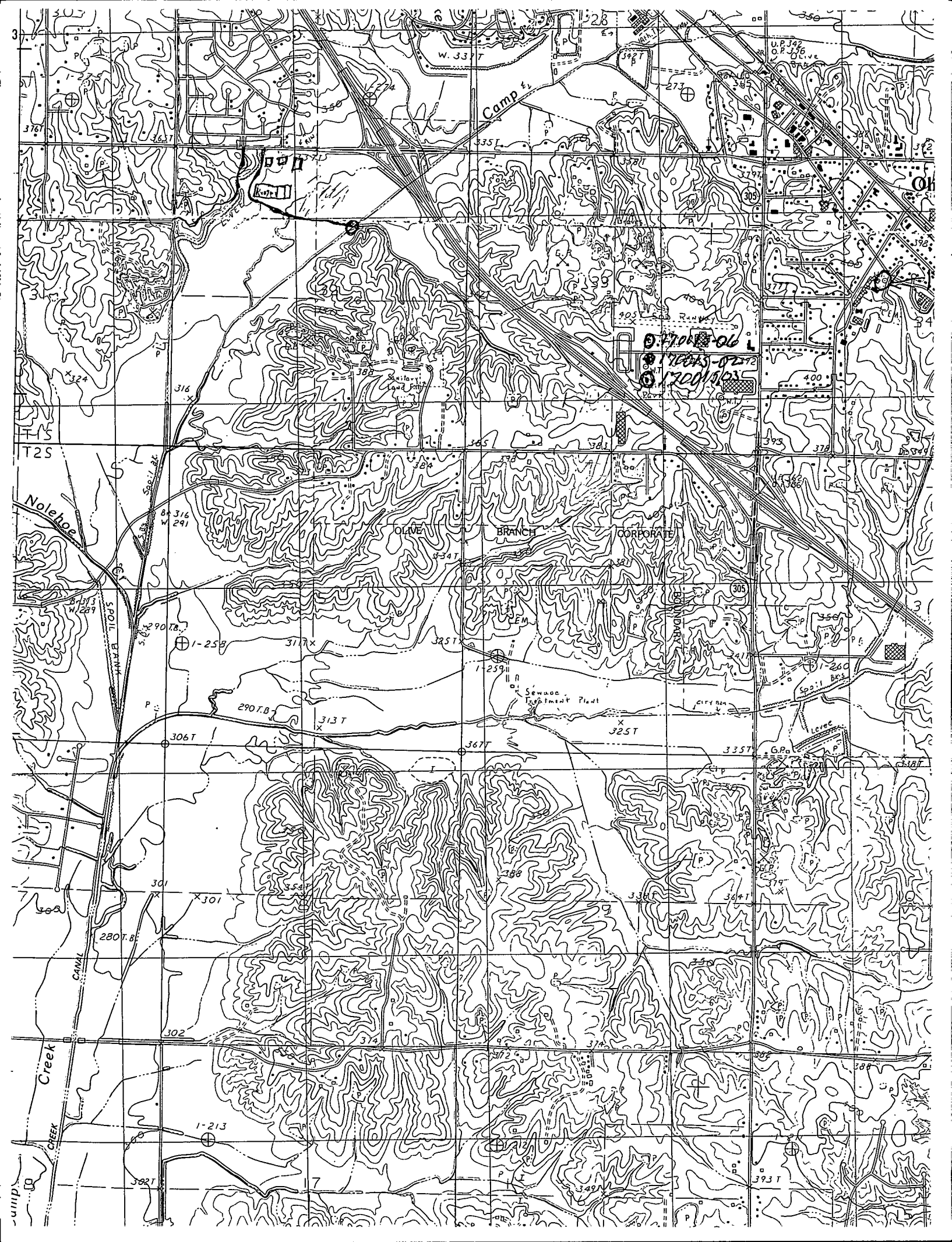
LOCATION DESCRIPTION: Olive Branch Quad.
NW CORNER WATER PLANT YARD.
Caroma
CORNA AV. & Hwy 78

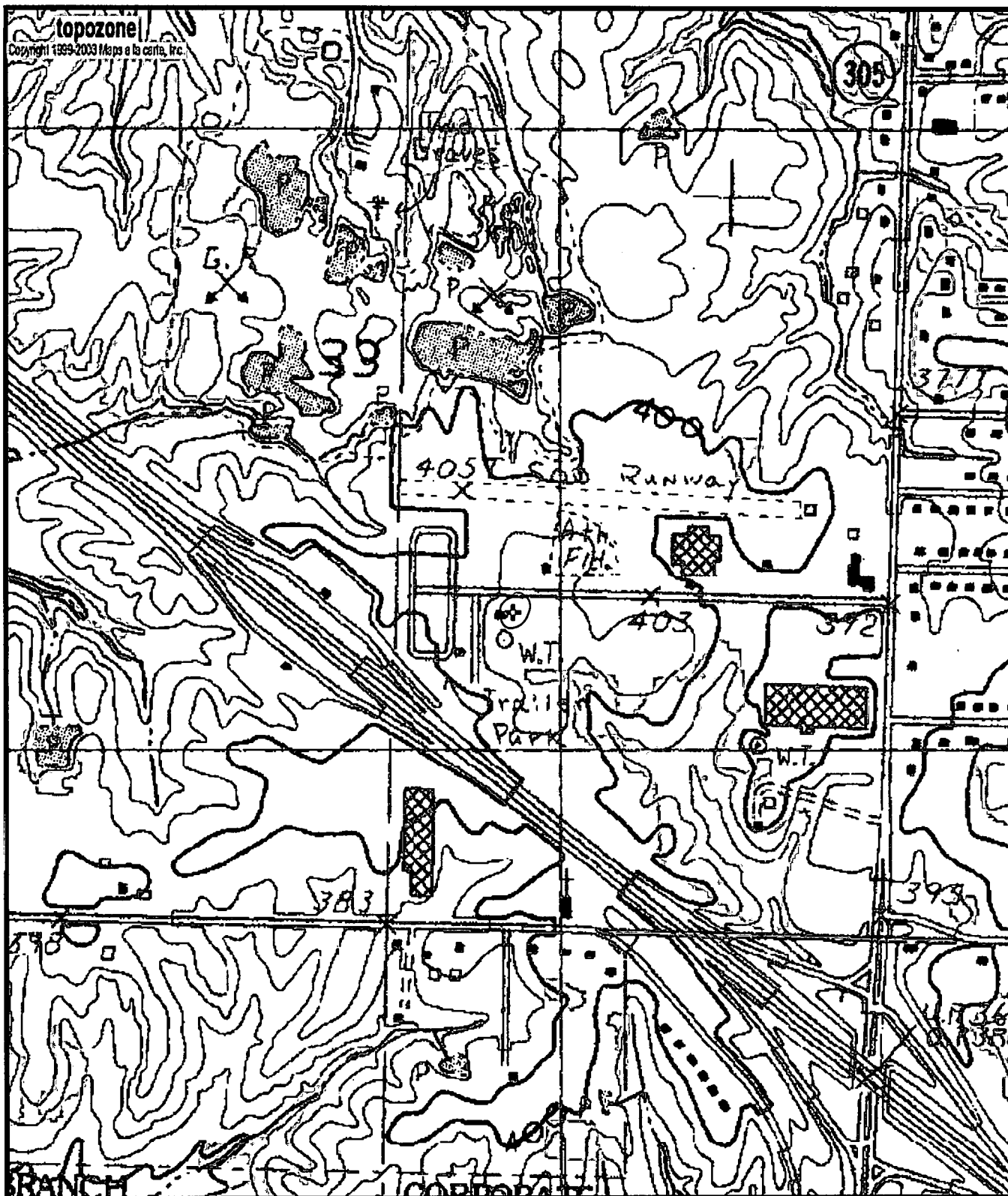
CASING DIA: _____ PUMP TYPE & SIZE: (Working Turbine off)

GPS FIELD LOCATION: LAT. 34.571414 LONG. 89.502796
34° 57' 08.1" 89° 50' 13.6"

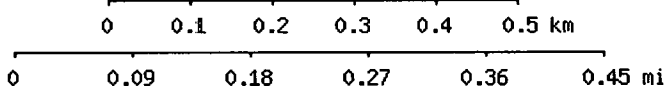
GPS CORRECTED LOCATION: LAT. 34.95242332 LONG. 89.83719775

REMARKS: _____





0170015-02
6W01663
D15



Map center is 34° 57' 09"N, 89° 50' 14"W (WGS84/NAD83)
Olive Branch quadrangle
 Projection is UTM Zone 16 NAD83 Datum

