

GW 2508
DOH # 170013-02

Houston

FORM 9-1642
(1-68)

Well No. D33

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

PUNCHED

NOV 7 1972

MASTER CARD

Record by JCM Source of data BOWC Date 7-72 Map OLIVE BRANCH 328

10/31/89

State 2 28 County (or town) De Soto 17

128.32
115.5L

Latitude: 34 59 30 N Longitude: 08 9 51 58 Sequential number: 1

Lat-long accuracy: 7 1 6 20 NE SW NW

Local well number: D033 2001506W Other number: B & M

DEC 9 1974
7:10 P

Local use: 125 Owner or name: MINERAL WELLS Address: City of Olive Branch

WL Data

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

11/30/88

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

WL-116.53

Use of well: 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

Aperture cards: yes

Log data: D

WELL-DESCRIPTION CARD

SAME AS ON MASTER CARD Depth well: 275 Meas. 3

WLLMP 110.91
MP top of casing - 1.5

Depth cased: (first perf.) 201 Casing type: Plastic Diam. 6

WLLSD 109.41

Finish: porous concrete, gravel w. concrete, gravel w. (screen), gallery, end, horiz. open hole, other G

340
109
231

Method: air bored, cable, dug, hyd jetted, air reverse, driven, drive rot., percussion, rotary, wash, other H

12/4/79
BSCB

Date Drilled: 6-15-72 9:7:2 Pump intake setting: 194

Driller: R. W. Wilson name address

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

Power (type): diesel, X nat gas, gasoline, hand, gas, wind; H.P. 20 Trans. or meter no. 41

Descrip. MP 340 Accuracy: (source) 5

Water Level: 102 Accuracy: D

Date meas: 9/28/75 975 Yield: 15 286 Method determined 61

Drawdown: 64 Accuracy: 63 Pumping period: 66 68

QUALITY OF WATER DATA: Iron 69 Sulfate 70 Chloride 71 Hard. 72

Sp. Conduct 73 Temp. 74 76 Date sampled 77 79

Taste, color, etc.

Well No.

D
W
W

Well No. 033

Latitude-longitude _____

PHYSIOGRAPHIC CARD
SAME AS ON MASTER CARD

Physiographic Province: _____ Section: 0.3

Drainage Basin: 1.6.R 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: TIE aquifer, formation, group S.S.

Lithology: S Origin: 2 Aquifer Thickness: _____ ft

Length of well open to: _____ ft 5.4 Depth to top of: _____ ft

MINOR AQUIFER: _____ aquifer, formation, group _____

Lithology: _____ Origin: _____ Aquifer Thickness: _____ ft

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

Intervals Screened: 6" Gravel Pack

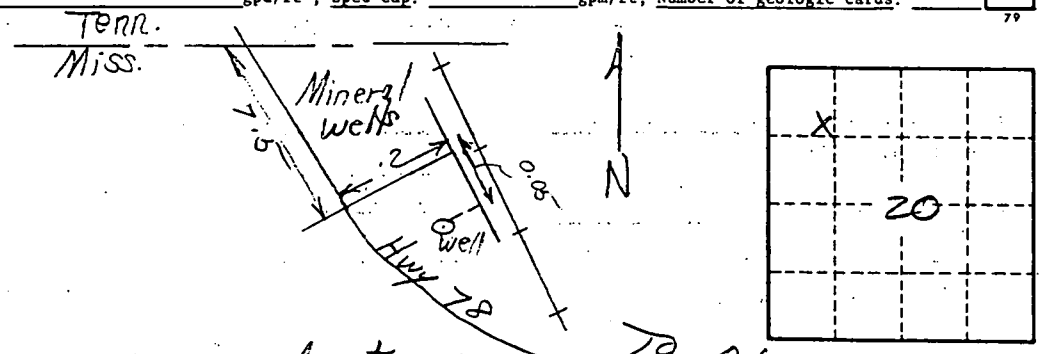
Depth to consolidated rock: _____ ft _____ Source of data: _____

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: _____



120,000 gal ground storage

- 201-225 24 screen 6"
- 225-245 Blank 6"
- 245-275 30' 6" screen

Gavel 180 to bottom 275
Cement 180 to top

De SoTo
 D33
 6-15-72
 GW 02508

MISSISSIPPI
 BOARD OF WATER COMMISSIONERS
 416 North State Street
 Jackson, Mississippi 3920

CODED

WATER WELL DRILLERS LOG

6-15 1972 R.W. Wilson De SoTo
 date well completed firm name county well located

LANDOWNER: <u>Mineral Well Water</u>	description of formations encountered	from	to
<u>Mineral Wells</u>			
<u>Miss</u> (mailing address)	<u>Br. clay + gravel</u>	<u>0</u>	<u>15</u>
	<u>Gravel - white clay</u>	<u>15</u>	<u>30</u>
	" "	<u>30</u>	<u>60</u>
WELL LOCATION: sec <u>20</u> T <u>1</u> N R <u>6</u> E	<u>white clay - Red sand</u>	<u>60</u>	<u>75</u>
(distance) (direction) (nearest town)	<u>Red sand</u>	<u>75</u>	<u>105</u>
	<u>white "</u>	<u>105</u>	<u>150</u>
	<u>Br. "</u>	<u>150</u>	<u>180</u>
	<u>white sand white clay</u>	<u>180</u>	<u>225</u>
WELL PURPOSE: (home, irrigation, municipal, industrial)	<u>" clay</u>	<u>225</u>	<u>240</u>
	<u>" sand</u>	<u>240</u>	<u>265</u>
WELL COMPLETION DATA:	<u>Rock - 6"</u>	<u>265</u>	
(1) diameter (inches) <u>6</u>	<u>white clay</u>		<u>275</u>
(2) total depth (feet) <u>275</u>			
(3) static water level (feet) _____ below/above top of ground.			
(4) casing <u>plastic</u> , <u>201</u> (material) (depth)			
<u>6"</u> (size) if telescope see back.			
(5) screen <u>54</u> , <u>201</u> (length) (depth to top)			
<u>6</u> , <u>gravel pack</u> (size) (material)			
(6) pump _____ (HP) (yield gpm)			
<u>Elec</u> (type power)			
(7) electric log <u>✓</u> (yes or no)			
_____ (organization running log)			
(8) how well bottom plugged <u>6"</u> <u>plastic Cap</u>			
DRILLERS REMARKS:			

CODEC

**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.

7-23-96 AGN.

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

Issued: <u>5-27-86</u>	Expires: <u>5-27-2006</u>	Fee Paid:	Permit No.
Lat. <u>34-59-21</u>	Long. <u>89-51-41</u>	Elev. <u>340</u>	USGS No.
Quad. <u>Olive Branch</u>	ASCS Farm No.	STAC.	MSDOH No.
Aquifer: <u>SPRT</u>	Tract No.		Basin No.
Remarks:			Dam Inv. No.

THIS APPLICATION IS FOR (Circle one): NEW PERMIT RENEWAL PERMIT NO. MS-GW-02508

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
(Address)

OLIVE BRANCH, MS 38654-2499 (601) 895 4000
(City) (State & Zip) (Telephone No.)

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

(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):

N E 1/4 of the N W 1/4 of Section 20, Township 01S, Range 06W, 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. 1 OTHER CITY WELL

SECTION B (to be completed for GROUNDWATER SOURCE)

1. AQUIFER: SPARTA MISSISSIPPI DEPARTMENT OF HEALTH NO.: 170013

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

If well has already been drilled, when was well completed (date)? JUNE 15, 19 72 Under whose name was well originally drilled (if known)? MINERAL WELLS WATER ASSOCIATION

3. Description of proposed or completed well:

(a) DEPTH OF WELL: 275 feet. DRILLER: WILSON INC.

(b) SURFACE CASING: Length 221 feet; Diameter 12 inches; Type PVC

(c) SCREEN: Length 54 feet; Diameter 6 inches; Type STAINLESS STEEL

(d) PUMP: Type SUBMERSIBLE; Size 20 HP; Capacity 250 gallons per minute; Setting depth 140 feet

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

4. PERMITTED VOLUME:

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

(b) 0.07 million gallons per day at a maximum rate of 250 gallons per minute

(CONTINUED ON BACK)

250

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 _____

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? _____

3. MUNICIPAL, WATER ASSOCIATION, or PRIVATE WATER SYSTEM

Chose "a" or "b". (a) The number of people served is 2,000 or (b) The number of connections is 550

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>20,000</u>	<u>1996</u>	<u>25,000</u>	<u>2001</u>	<u>30,000</u>	<u>2006</u>	<u>35,000</u>	<u>2011</u>
	(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.


DON SAPPINGTON
(Name)

9189 PIGEON ROOST
(Address)

OLIVE BRANCH, MS 38654-2499
(City, State, Zip)

601 895 4000
(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)

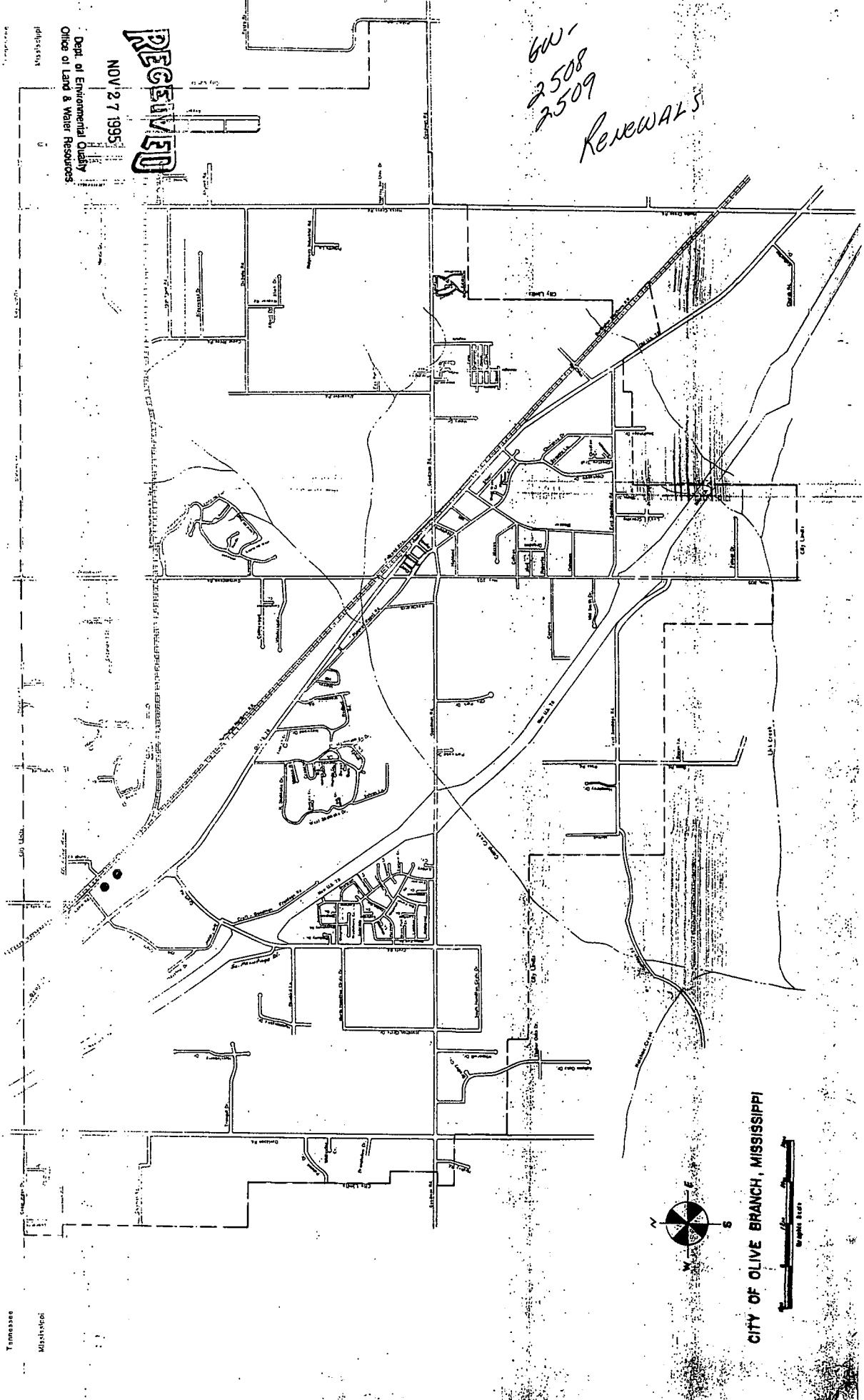
Subscribed and sworn to before me this 6th day of November, 1995, at Olive Branch County of DeSoto

My commission expires My Commission Expires April 13, 1998; Sybilie Barry Notary Public.

DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR
PUBLIC SUPPLY WELLS PROJECT

GPS LOG

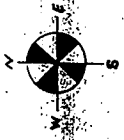
USER NAME(S): SHR + PEG
LAK / DKB DATE: 7-21-96
7/26/94
UNIT DEQ #: 84090 FILE #: 60704/66
80729208
HEALTH DEPT. #: 170013-02 ELEV. 320
USGS #: 1172 D-33 OLWR #: MS-GW-02502
OWNER: MINERAL WELLS
LOCATION: SW/NE/PW S 20 T 15 R 6W COUNTY: DE SOTO
Olive Branch Quad
LOCATION DESCRIPTION: 100' SOUTH - WATER PLANT 100' WEST
OF RR TRACKS.
CASING DIA: 6" PUMP TYPE & SIZE: SUBMERSIBLE
GPS FIELD LOCATION: LAT. 34.59332 N LONG. 89.51580 W
34° 59' 21.7" 89° 51' 37.7"
GPS CORRECTED LOCATION: LAT. 34.98911492 LONG. 89.85982476
REMARKS: SEE WELL #1 FOR WATER PLANT LOC. IN



6W-
2508
2509
RENEWALS

NOV 27 1995
RECEIVED
Dept. of Environmental Quality
Office of Land & Water Resources

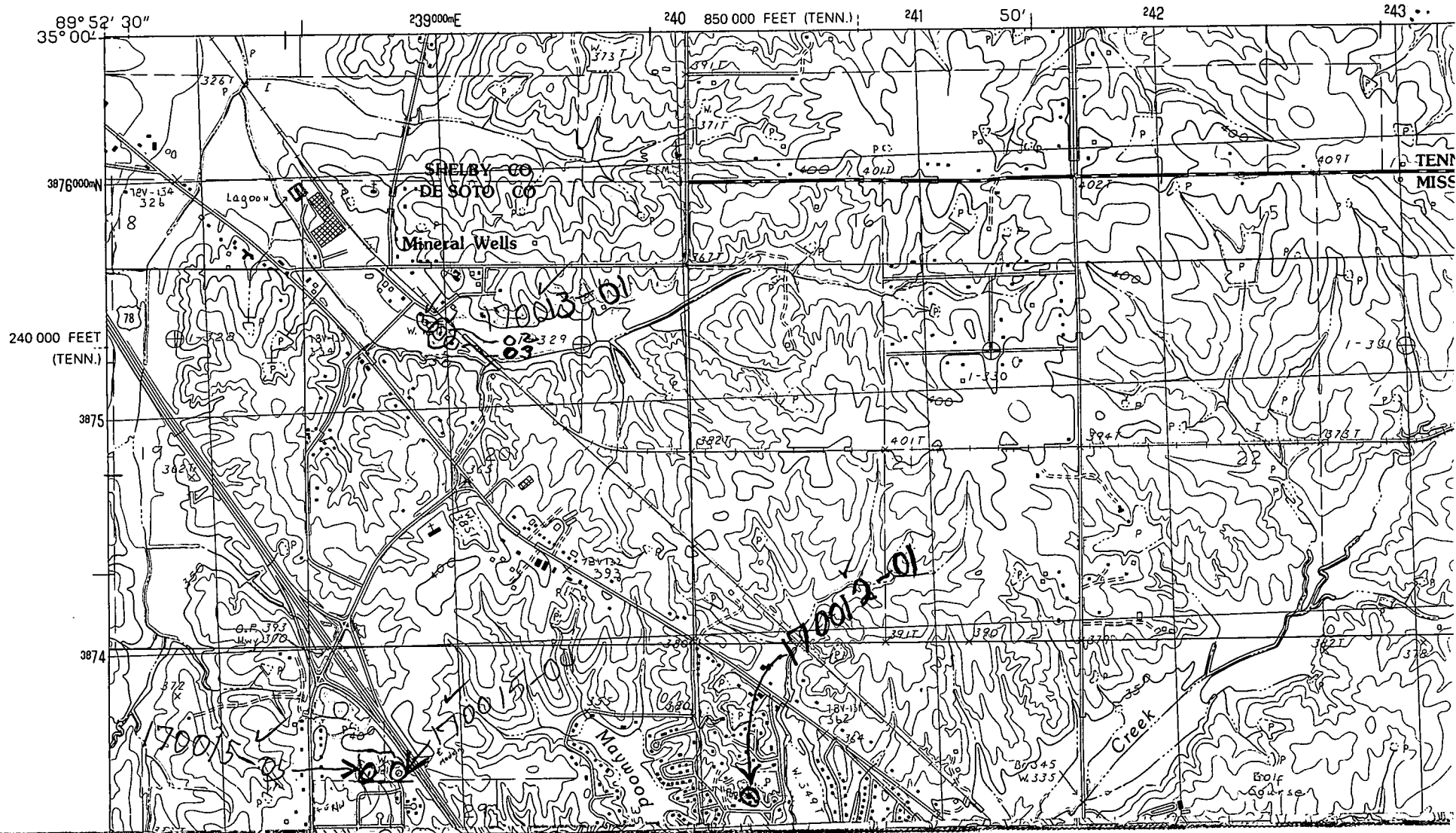
Tennessee
Mississippi

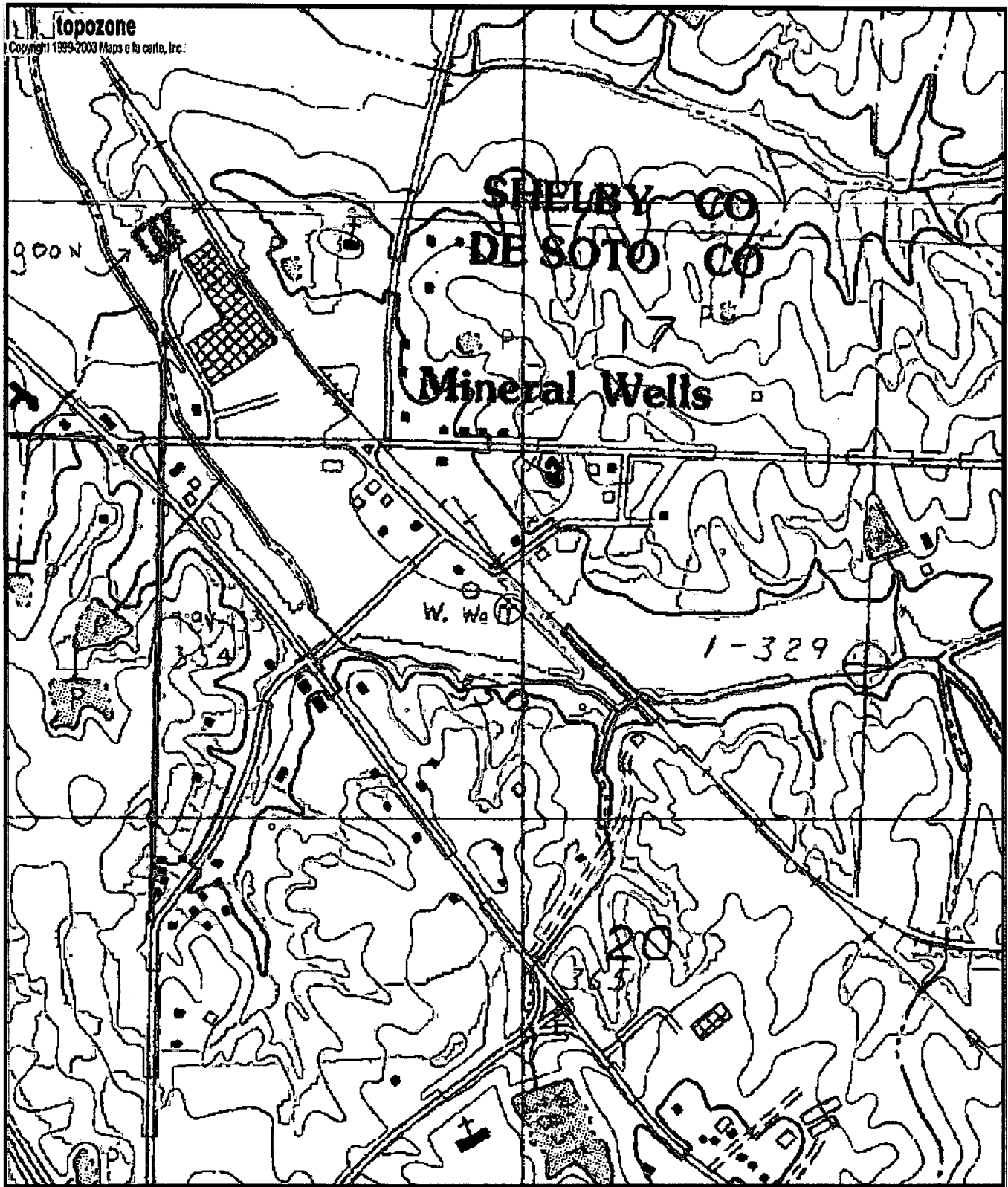


CITY OF OLIVE BRANCH, MISSISSIPPI



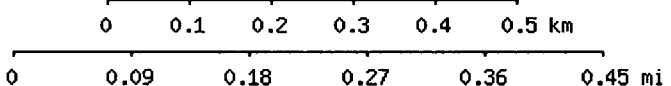
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY





topozone
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0170013-02
 Gw02508
 D33



Map center is 34° 59' 21"N, 89° 51' 35"W (WGS84/NAD83)
Olive Branch quadrangle
 Projection is UTM Zone 16 NAD83 Datum

M=-0.128
 G=-1.641