

WELL SCHEDULE
GEOLOGICAL SURVEY

U. S. DEPT. OF THE INTERIOR

PUNCHED
DEC 10 1974
RESOURCES DIVISION

MASTER CARD

Record by ef Source of data MBWC Date 7-9-74 Map _____

State 28 County (or town) De Soto 17

Latitude: 34 50 25 N 0 Longitude: 0 90 0 9 40 Sequential number: 1

Lat-long accuracy: 5 3 9 19 19 NW SE

Local well number: J084 1903509W Other number: _____

Local use: 009 Owner or name: Trinity Water Co.

Owner or name: TRINITY WATER Address: Walton Development Co.

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

Use of water: (A) Air cond, Bottling, Comm, Dewater, Power, Fire, Dom, Irr, Med, Ind, P S, Rec, (S) Stock, Instit, 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 0 Freq. W/L meas: 0 Field aquifer char. 0

Hyd. lab. data: _____

Qual. water data; type: _____

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

Aperture cards: _____

Log data: 0

WELL-DESCRIPTION CARD

SAME AS ON MASTER CARD Depth well: 447 Meas. 3

Depth cased: (first perf.) 380 Casing type: Steel Diam. 8

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

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

Date Drilled: 5/74 9/74 Pump intake setting: _____ ft

Driller: Carlson Well Supply

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 0 Shallow 0

Power (type): (A) diesel, (B) elec., (C) gas, (D) gasoline, (E) hand, (F) gas, (G) wind, (H) H.P., (I) LP, (J) Trans. or meter no. 20 0

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

Alt. LSD: 280 Accuracy: (source) 4

Water Level: _____ ft above _____ ft below MP; _____ ft below LSD 96 Accuracy: 0

Date meas: 5.7.74 Yield: _____ gpm 300 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. _____

Well No. _____

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

HYDROGEOLOGIC CARD

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

D Drainage Basin: _____ **15E** Subbasin: _____

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

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

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

Length of well open to: _____ ft **67** Depth to top of: _____ 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: _____

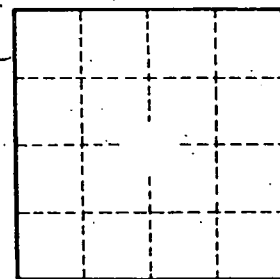
Depth to basement: _____ ft _____ Source of data: _____

Surficial material: _____ Infiltration characteristics: _____

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

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

See well J4 for location.
Located across lake from treatment plant.



Well No.

J84

De Soto
 J 84
 5/74
 02418

MISSISSIPPI
 BOARD OF WATER COMMISSIONERS CODED

416 North State Street
 Jackson, Mississippi 39201

WATER WELL DRILLERS LOG

May 19 74 Carloss Well Supply Desota
 date well completed firm name county well located

LANDOWNER: Lake "O" Hills	description of formations encountered	from	to
3120 S. Perkins Memphis			
(mailing address)	Red Sandy Clay	0'	85'
WELL LOCATION:	Coarse Sand	85'	100'
sec 19 T. 3 N R. 26 W	Grey Clay	100'	279'
3 miles W of Eureka	Rock	279'	280'
(distance) (direction) (nearest town)	Hard Shale	280'	293'
WELL PURPOSE:	Rock	293'	294'
(home, irrigation, municipal, industrial)	Shale and Lignite	294'	315'
WELL COMPLETION DATA:	Lignite	315'	318'
(1) diameter (inches) 8"	Shale	318'	333'
(2) total depth (feet) 447'	Fine Sand	333'	355'
(3) static water level (feet) 96' below top of ground.	Medium Sand	355'	456'
(4) casing Steel 380' (material), (depth)			
(size) If telescope see back.			
(5) screen 60' 385' (length), (depth to top)			
6" Stainless (size), (material)			
(6) pump 15 300 (HP), (yield gpm)			
Electric (type power)			
(7) electric log NO (yes or no)			
(organization running log)			
(8) how well bottom plugged -B. P. Valve			
DRILLERS REMARKS:			

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

RECEIVED
MAR 01 1996

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. 4-23-96 AGN.

FORM DOWR 40 (Revised 04/94) Quality

Issued: <u>5-13-86</u>	Expires: <u>5-13-2006</u>	Fee Paid: <input checked="" type="checkbox"/>	Permit No. <u>64-067617</u>
Lat. <u>34 48 23 ok</u>	Long. <u>90 11 21 ok</u>	Elev. <u>290'</u>	USGS No.
Quad. <u>Banks</u>	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. 02417

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: NORTH MISSISSIPPI UTILITY CO 64-0676172
(Name) (SSN or Tax ID No.)

P O BOX 362
(Address)

HERNANDO MS/38632 (601) 429 - 9509
(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):

ok NW 1/4 of the SE 1/4 of Section 19, Township 3 S, Range 9 W, 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: SPARTA MISSISSIPPI DEPARTMENT OF HEALTH NO.: 170029

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

If well has already been drilled, when was well completed (date)? MAY 31, 19 66. Under whose name was well originally drilled (if known)? _____

3. Description of proposed or completed well:

(a) DEPTH OF WELL: 433 feet. DRILLER: CARLOSS WELL SUPPLY

(b) SURFACE CASING: Length 388 feet; Diameter 8 inches; Type STEEL

(c) SCREEN: Length 45 feet; Diameter 6 inches; Type STAINLESS STEEL

(d) PUMP: Type TURBIN; Size _____; Capacity 250 gallons per minute; Setting depth 160 feet

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

4. PERMITTED VOLUME :

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

(b) ~~0002~~ .05 million gallons per day at a maximum rate of 250 gallons per minute

03

Well (CONTINUED ON BACK) 250

3-8-96

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)

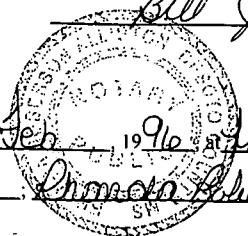
- IRRIGATION:** List the number of acres of each crop to be irrigated: Rice _____; Cotton _____; Oats _____; Corn _____; Soybeans _____; Pasture _____; Truck _____; Wheat _____; Grain Sorghum _____; Other (specify) _____ Acres _____
 A. Method of Irrigation (circle one) - Center Pivot Flood Furrow
 B. 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 _____ or (b) The number of connections is 246
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?

$\frac{72,000}{(\text{Volume})}$	$\frac{2000}{(\text{Year})}$	$\frac{72000}{(\text{Volume})}$	$\frac{2005}{(\text{Year})}$	$\frac{72,000}{(\text{Volume})}$	$\frac{2010}{(\text{Year})}$	$\frac{72,000}{(\text{Volume})}$	$\frac{2015}{(\text{Year})}$
----------------------------------	------------------------------	---------------------------------	------------------------------	----------------------------------	------------------------------	----------------------------------	------------------------------
- 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:** THIS WELL IS USED AS A STANDBY WELL

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

BILL J. ROBERSON
(Name)
P O BOX 362
(Address)
HERNANDO MS 38632
(City, State, Zip)
(601) 429-9509
(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.

Bill J. Roberson
(Signature)

Feb 28 day of Feb, 1998 at Hernando County of Mississippi
My commission expires March 23, 1998 Donald A. Bledsoe Notary Public.

DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR
PUBLIC SUPPLY WELLS PROJECT

GPS LOG

5HB+PEG
USER NAME(S): LAK/DMS DATE: 8-21-96
UNIT DEQ #: 84090 FILE #: B0726 23B
HEALTH DEPT. #: 170029-02 ELEV. 305 A082121A
USGS #: 574 J84 OLWR #: MS-GW-02417 2418
OWNER: N. MS. Utl. / Lake O'Hills
LOCATION: SE/W/SE S 20 T 35 R 9W COUNTY: Desoto
BANKS QUAD.
LOCATION DESCRIPTION: Well in fence N. NE of
Well #1.
CASING DIA: 8" PUMP TYPE & SIZE: Turbine / 20
GPS FIELD LOCATION: LAT. 34-48-391 N LONG. 90-11-357W
34° 48' .357" 90° -11' .353"
GPS CORRECTED LOCATION: LAT. 34.80601804 LONG. 90.18907353
REMARKS: See Well #1 for location

14000W

13000W

1200W

11000W

3000S

T-3-S

A

B

RECEIVED

MAR 01 1996

Dept. of Environmental Quality
Office of Land & Water Resources

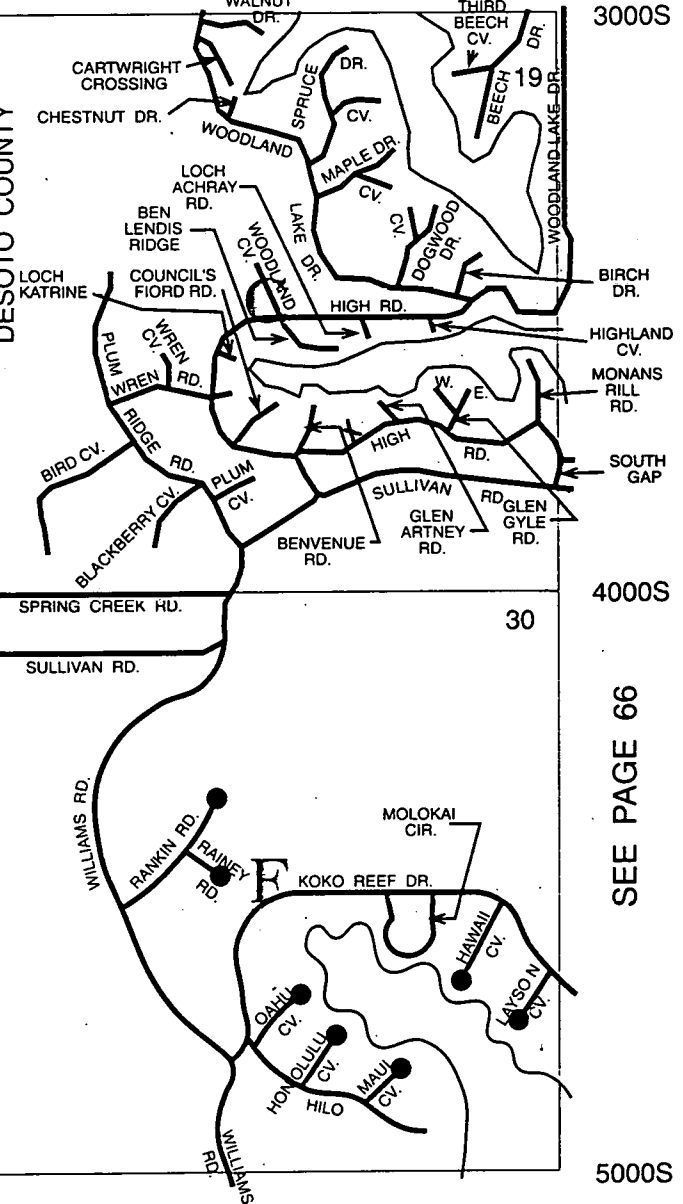
TUNICA COUNTY
DESOTO COUNTY

THIS AREA NOT MAPPED

D

E

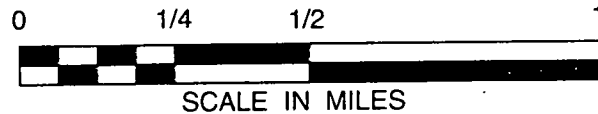
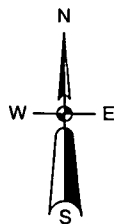
60' 2 1/4" Renew

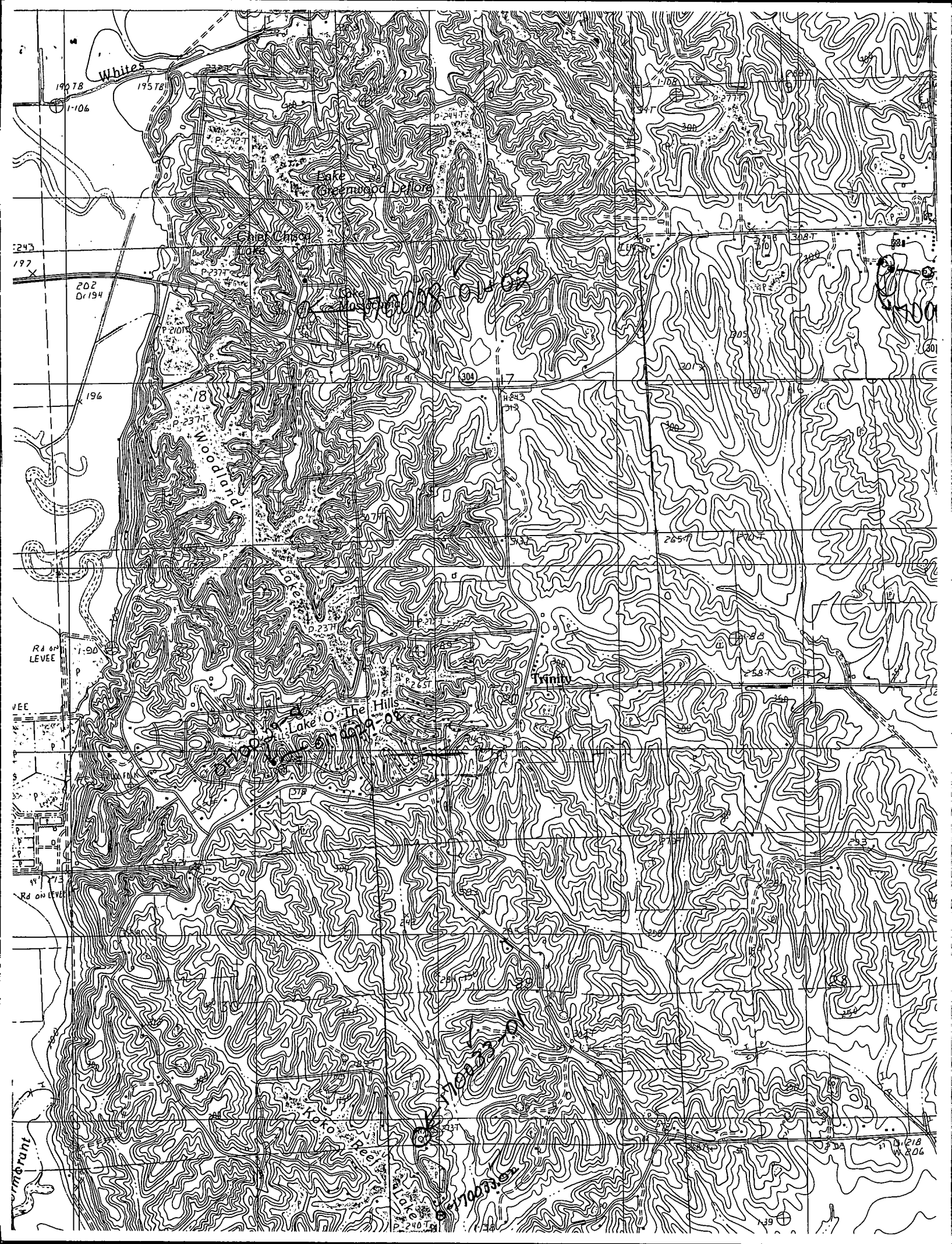


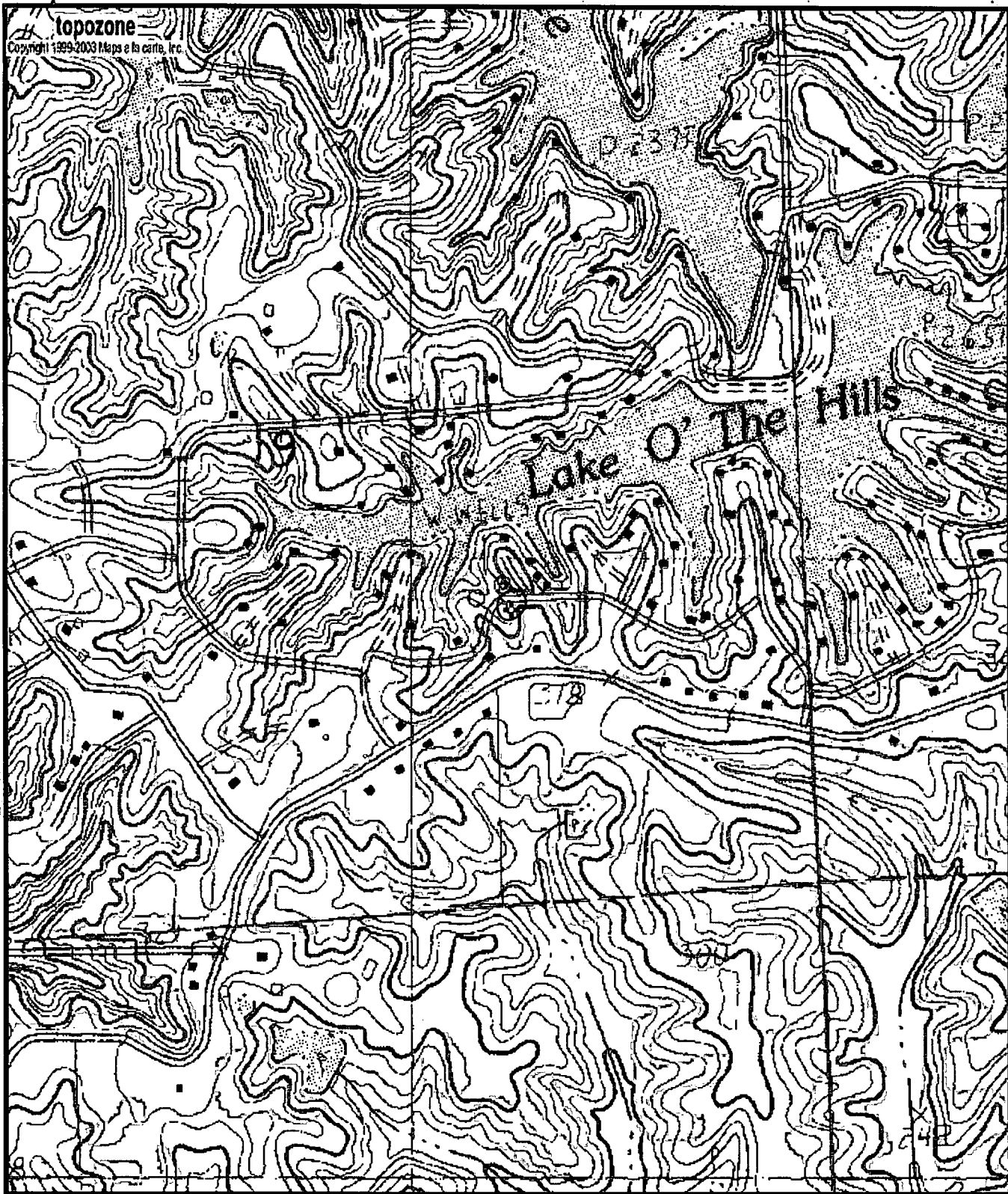
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SEE PAGE 66

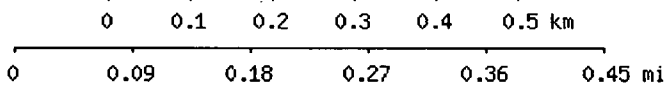
5000S







0170029-02
6w02418
J84



Map center is 34° 48' 22"N, 90° 11' 21"W (WGS84/NAD83)

Banks quadrangle

Projection is UTM Zone 15 NAD83 Datum

M=0.143
G=1.606