

TEMP. REFILED FOR MISSING

029

GW02611 DOH # 180011-01

WELL SCHEDULE

U. S. DEPT. OF THE INTERIOR

GEOLOGICAL SURVEY

WATER RESOURCES DIVISION

PUNCHED and VERIFIED  
ROLLA COMPUTATION BRANCH

Driller's  
log  
MISSING

MASTER CARD

Record by JAW Source of data \_\_\_\_\_ Date \_\_\_\_\_ Map Hattiesburg

State 28 County (or town) FORREST 78

Latitude: 312002N Longitude: 0891544 Sequential number: 1

Lat-long accuracy: 20 T. 40 S. R. 130 Sec 1 SE SW SW

Local well number: D029CC0104N13W Other number: \_\_\_\_\_

Local use: 009 Owner or name: Petal

Owner or name: FORREST UTL Address: \_\_\_\_\_

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

Use of water: (A) (B) (C) (D) (E) (F) (H) (I) (M) (N) (P) (R) H

Stock, Instit, Unused, Recharge, Desal-P S, Desal-other, Other \_\_\_\_\_

Use of well: (A) (D) (G) (H) (I) (P) (R) (T) (U) (W) (X) (Z) W

Anode, Drain, Seismic, Heat Res, Obs, Oil-gas, Recharge, Test, Unused, Withdraw, Waste, Destroyed.

DATA AVAILABLE: Well data  Freq. W/L meas.:  Field aquifer char.

Hyd. lab. data: \_\_\_\_\_

Qual. water data; type: USGS Complete 5-28-64

Freq. sampling:  Pumpage inventory: no; period: \_\_\_\_\_

Aperture cards: \_\_\_\_\_

Log data: \_\_\_\_\_

WELL-DESCRIPTION CARD

SAME AS ON MASTER CARD Depth well: 134 ft Meas. accuracy 6

Depth cased: 103 ft Casing type: \_\_\_\_\_; Diam. in 10

Finish: (C) porous concrete, (F) gravel w. (C) gravel w. (H) horiz. (I) open perf., (P) screen, (S) sd. pt., (T) shored, (W) open hole, (X) other, (Z) other S

Method Drilled: (A) air rot, (B) bored, (C) cable, (D) dug, (H) hyd jetted, (J) air percussion, (P) reverse, (R) rotary, (T) trenching, (U) driven, (W) wash, (X) other H

Date Drilled: 962 Pump intake setting: \_\_\_\_\_ ft

Driller: Carlson Well Co. address \_\_\_\_\_

Lift (type): (A) air, (B) bucket, (C) cent., (J) multiple, (L) multiple, (M) multiple, (N) none, (P) piston, (R) rot., (S) submerg, (T) turb., (U) other 7 Deep  Shallow

Power (type): nat, LP, diesel, elec, gas, gasoline, hand, gas, wind, H.P. 20  Trans. or meter no. \_\_\_\_\_

Descrip. MP \_\_\_\_\_ ft above \_\_\_\_\_ ft below LSD, Alt. MP \_\_\_\_\_

Alt. LSD: 154 Accuracy: (source) \_\_\_\_\_

Water Level 20.3 ft above MP; Ft below LSD 20 Accuracy: \_\_\_\_\_

Date meas: \_\_\_\_\_ Yield: 750 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 6.9 Temp. \_\_\_\_\_ °F Date sampled 562

Taste, color, etc. \_\_\_\_\_

Well No.

029

RECEIVED

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

NOV 14 1995

This box is for office use only.

1-23-96 AGN.

FORM OLWR-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. MS G W 02611

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 PETAL (Name) 64-5653775 (SSN or Tax ID No.) P O BOX 405 (107 WEST 8TH AVENUE) (Address) PETAL MS 39465 (City) (State & Zip) (601) 544-6981 (Telephone No.)

APPLICANT, AGENT, OR LESSEE (if different from Landowner): (Name) (SSN or Tax ID No.) (Address) (City) (State & Zip) (Telephone)

City map sent

Location of diversion/withdrawal point (A suitable map with location marked must accompany this application): OK SW 1/4 of the SW 1/4 of Section 01, Township 4N, Range 13W, County FORREST

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: ALLUVIUM Cixonele MISSISSIPPI DEPARTMENT OF HEALTH NO.: 180011-01
2. Proposed work will begin on ... and will be completed by ...
3. Description of proposed or completed well: (a) DEPTH OF WELL: 134 feet. DRILLER: CARLOSS WELL SUPPLY CO (b) SURFACE CASING: Length 93 feet; Diameter 10 3/4 inches; Type STEEL (c) SCREEN: Length 31 feet; Diameter 6 inches; Type GRAVEL GUARD (d) PUMP: Type TURBINE; Size; Capacity 760 gallons per minute; Setting depth feet (e) POWER UNIT: Type VHS; Size 20 horsepower
4. PERMITTED VOLUME: (a) acre-feet per year at a maximum rate of gallons per minute (b) million gallons per day at a maximum rate of 760 gallons per minute

0.50 del 12-6-95

(CONTINUED ON BACK) 760

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

1. Source of water is from \_\_\_\_\_ which drains into \_\_\_\_\_  
which drains into \_\_\_\_\_  
(major stream or river)

2. Discription of pump/diversion works:

Pump (size & type): \_\_\_\_\_ Power Unit (size & type): \_\_\_\_\_

Lift: \_\_\_\_\_ feet Maximum capacity: \_\_\_\_\_ gallons per minute

3. \_\_\_\_\_ 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)

1. Name of storage reservoir: \_\_\_\_\_ Dam Height: \_\_\_\_\_ feet

2. 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)**

1. **IRRIGATION:** List the number of acres of each crop to be irrigated: Rice \_\_\_\_\_; Cotton \_\_\_\_\_; Oats \_\_\_\_\_;  
Corn \_\_\_\_\_; Soybeans \_\_\_\_\_; Pasture \_\_\_\_\_; Truck \_\_\_\_\_; Wheat \_\_\_\_\_; Grain Sorgum \_\_\_\_\_;  
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. \_\_\_\_\_

2. **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 \_\_\_\_\_ or (b) The number of connections is 2750

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? 50MGD 2001; 55MGD 2006; 60MGD 2011; 65MGD 2016  
(Volume) (Year) (Volume) (Year) (Volume) (Year) (Volume) (Year)

4. **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? \_\_\_\_\_

5. **RECREATION:** Explain how water will be used: \_\_\_\_\_

6. **OTHER USE:** Explain in detail (if needed, attach another page): \_\_\_\_\_

7. **REMARKS:** \_\_\_\_\_

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

JACK GAY

(Name)

P O BOX 564

(Address)

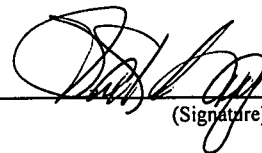
PETAL MS 39465

(City, State, Zip)

545-1776

(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 10<sup>th</sup> day of Nov, 19 95, at Forrest County of Mississippi

My Commission Expires August 13, 1998

My commission expires \_\_\_\_\_; Ava C Pickett Notary Public.

DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR

PUBLIC SUPPLY WELLS PROJECT

Hattiesburg  
Quad.

GPS LOG

USER NAME(S): CA. Hotwreak DATE: 6/29/94  
UNIT DEQ #: 82555 FILE #: C062920A  
HEALTH DEPT. #: 180011-01 ELEV. 152  
USGS #: 2-127 D29 OLWR #: 2611  
OWNER: City of Petal  
LOCATION: SE-SW-SW S 1 T 4N R 13W COUNTY: Forrest  
LOCATION DESCRIPTION: SE Corner of Hillcrest Loop + Boxtel ST.  
CASING DIA: 18" PUMP TYPE & SIZE: 20 HP Elec.  
GPS FIELD LOCATION: LAT. 31° 19.947 LONG. 89° 15.672  
GPS CORRECTED LOCATION: LAT. 31 19 56.389 LONG. 89 15 36.614  
REMARKS: GPS at Well  
31.332330 89.260170

Original is missing

GPS

HATTIESBURG QUADRANGLE  
MISSISSIPPI  
7.5 MINUTE SERIES (TOPOGRAPHIC)

31° 46' 1 NW  
(BARRONTOWN)

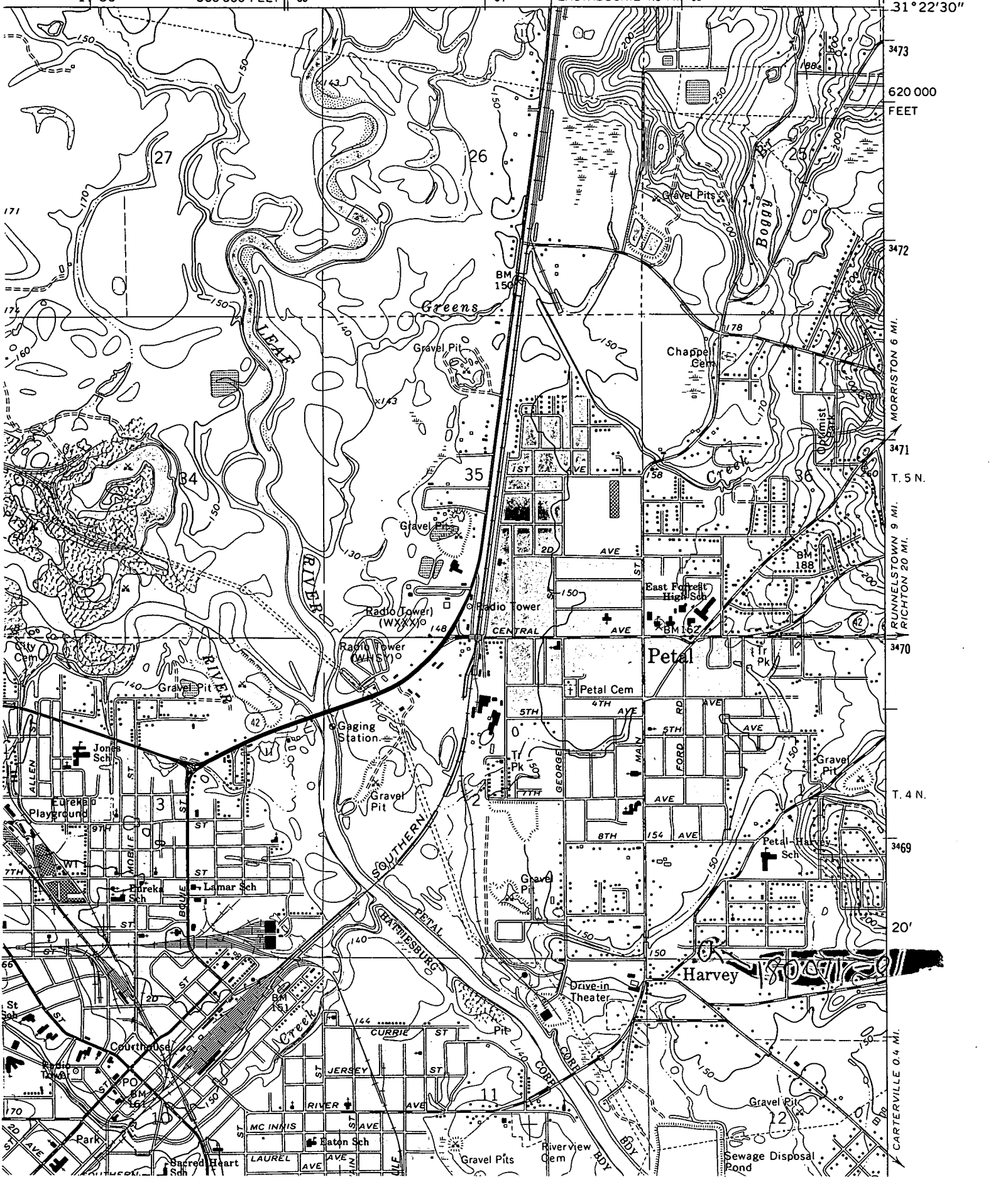
17° 30"

360 000 FEET || 283

284

LAUREL 26 MI.  
EASTABUCHIE 4.3 MI || 285

89° 15' 31" 22' 30"



3473  
620 000  
FEET

3472

MORRISTON 6 MI.

T. 5 N.

RUNNELSTOWN 9 MI.  
RICHTON 20 MI.

3470

T. 4 N.

3469

20'

CARTERVILLE 0.4 MI.