WELL SCHEDULE

U.S. DEPT. OF THE INTERIOR
GEOLOGICAL SURVEY
WATER RESOURCES DIVISION
PUBLISHED AND VERIFIED
ROLL ACCEPTANCE BRANCH

MASTER CARD

Record by: JG
Source of data: 2-8
Date: 08/11/39
Map: McLaurin

State: [Blank]
Longitude: 08° 10' 00"
Latitude: 31° 56' 25"
Lat-long accuracy: S 2° 20', 12 sec
Local well number: 064
Local use: [Blank]

Owner or name: [Blank]
Address: [Blank]
Ownership: County, Fed Gov't, Corp or Co, Private, State Agency, Water Dist
Use of: Air cond, Bottling, Comm, De-water, Power, Fire, Dom, Irr, Med, Ind, F S, Rec, Stock, Insect, Unused, Repurpose, Recharge, Desal-P S, Desal-other, Other

Use of: (A) (D) (G) (H) (I) (P) (R) (T) (U) (W) (X) (Y) (Z)
well: Anode, Drain, Seismic, Heat Res, Obs, Oil-gas, Recharge, Test, Unused, Withdraw, Waste, Destroyed

DATA AVAILABLE:
Well data: [Blank]
Freq. W/I meas.: [Blank]
Field aquifer char.: [Blank]
Hyd. lab. data: [Blank]
Qual. water data: USGS Complete 01-10-66
Freq. sampling: yes
Pumagage inventory: [Blank]
Aperture cards: [Blank]
Log date: [Blank]

WELL-DESCRIPTION CARD

SAME AS ON MASTER CARD
Depth well: 40.00
Depth casing: [Blank]
Casing type: [Blank]
Casing accuracy: 24.6
Finish: (C) (F) (G) (H) (I) (P) (S) (T) (U) (W) (X) (Y) (Z)
Method: (A) (B) (C) (D) (H) (I) (P) (R) (T) (U) (W) (X)
Drilled: air bored, cable, dug, hyd jetted, air reverse trenching, driven, rot, percussion, rotary, other
Date: [Blank]
Driller: [Blank]

Lift: (A) (B) (C) (J) multiple, multiple, none, piston, rot, submersg, turb, other
Power: nat LP
(type): diesel, elec, gas, gasoline, hand, gas, wind, H.P.

Descrip. MP: 100
Alt. LSD: 3.014
Accuracy: (source)
Water Level: above 43, above 43, below MP, F: M
Level: 1.73
Accuracy: [Blank]

Drawdown: 1.17
Yield: [Blank]

QUALITY OF WATER DATA:
Iron: 1.3
Sulfate: 780
Chloride: 5.3
Hard: 26
Sp. Conduct: 130
K x 10
Temp.: [Blank]
Date sampled: 1-10-66
Taste, color, etc.: [Blank]
HYDROGEOLOGIC CARD

Physiographic Province:

Drainage Basin:

Subbasin:

Topo of well site:

Major Aquifer:

System:

Series:

Aquifer, formation, group:

Lithology:

Origin:

Depth to top of well:

Thickness:

Minor Aquifer:

System:

Series:

Aquifer, formation, group:

Lithology:

Origin:

Depth to top of well:

Thickness:

Intervals Screened:

Depth to consolidated rock:

Source of data:

Depth to basement:

Source of data:

Surficial material:

Infiltration characteristics:

Coefficient Trans:

Coefficient Storage:

Coefficient Form:

Spec. cap:

gpm/ft; Number of geologic cards:
### 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) 951-5022

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<td>Long.</td>
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<td>Elev.</td>
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<td>Quasi</td>
<td>Mocny</td>
<td>ASCS Farm No.</td>
<td>STAC.</td>
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<td>MSDKN No.</td>
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<td>Mocny</td>
<td>Tract No.</td>
<td></td>
<td>Basin No.</td>
<td>031 70007</td>
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**Remarks:** Dam Inv. No. 23-96 A6N.

**THIS APPLICATION IS FOR (Circle one):** NEW PERMIT [ ] RENEWAL PERMIT NO. MS-GW-00097

**THIS APPLICATION IS FOR (Circle one):** GROUNDWATER [ ] COMPLETE A,B,E SURFACE WATER - COMPLETE A,C,D,E

**BENEFICIAL USE (Circle one or more):**
- 0 Public Supply - Municipal, Rural Water, or Private Water
- 2 Irrigation
- 3 Industrial
- 4 Fish Cultures
- 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:** State of Mississippi-Mississippi Military Department

(Name) (SSN or Tax ID No.)

NGS-FMD, P. O. Box 5027

(Address)

Jackson MS 39296-5027 (601) 973-6238

(City) (State & Zip) (Telephone No.)

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

Camp Shelby Training Site

(Name) (SSN or Tax ID No.)

CSTS-DPW, Building 6600

(Address)

Camp Shelby MS 39407-5500 (601) 558-2690

(City) (State & Zip) (Telephone)

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

NW 1/4 of the NE 1/4 of Section 29, Township 03N, Range 12W, 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:** Mocny

2. Proposed work will begin on 01-01-19 and will be completed by 00-00-19

   If well has already been drilled, when was well completed (date)? 01-01-19 Under whose name was well originally drilled (if known)? 00-00-19 Annual Training Site, Camp Shelby

3. Description of proposed or completed well:

   (a) **DEPTH OF WELL:** 400 feet

   (b) **SURFACE CASING:** Length 20 feet; Diameter 10 inches; Type Cas Iron

   (c) **SCREEN:** Length 20 feet; Diameter 8 inches; Type unknown

   (d) **PUMP:** Type Turbine; Size 8 inch; Capacity 900 gallons per minute; Setting depth 246'-8" feet

   (e) **POWER UNIT:** Type Electric Motor; Size 00 horsepower

4. **PERMITTED VOLUME:**

   (a) 200 million gallons per year at a maximum rate of 000 gallons per minute

   (b) 100 million gallons per day at a maximum rate of 900 gallons per minute

(Continued on back)
SECTION C (to be completed for SURFACE WATER SOURCE)

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

2. 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)

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 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. __________

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 __________; (b) the number of connections 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 (20) years? __________ (Volume) __________ (Year) __________ (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.

MAJ (P) R. L. Harrington, Jr.  
(Name)

CSS—DPW, BLDG 6600  
(Address)

Camp Shelby, MS 39407-5500  
(City, State, Zip)

(601) 558-2690  
(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 19th day of October 1995 at Camp Shelby, County of Hinds
My commission expires July 31, 1999  
Notary Public.
DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR
PUBLIC SUPPLY WELLS PROJECT

GPS LOG
Horbeak

USER NAME(S): Sh. Bishop & C.A. Horbeak
DATE: 6/6/96

UNIT DEQ #: 82 859/82859
FILE #: 8B06018A

HEALTH DEPT. #: 180082-01
ELEV. 300

USGS #: 2-083
OLWR #: 97

OWNER: Camp Shelby

LOCATION: SE/NW/NE S 29 T 3 N R 12 W
COUNTY: Forrest

LOCATION DESCRIPTION: Forest one in Aug 1287
Between 12th St. & 13th St.

CASING DIA: 12"  PUMP TYPE & SIZE: Large 409 & Rockwool Diesel

GPS FIELD LOCATION: LAT. 31° 1.520  LONG. 89° 13.089

GPS CORRECTED LOCATION: LAT. 31.1980304  LONG. 89.21916338

REMARKS: GPS located at well