

WRD Exp. (GW)  
April 1966

Well No. GL

### WELL SCHEDULE

U. S. DEPT. OF THE INTERIOR

GEOLOGICAL SURVEY

WATER RESOURCES DIVISION

PULCHED and VERIFIED  
ROLLA CORP. OF MISSOURI BRANCH

#### MASTER CARD

Record by Jac Source of data \_\_\_\_\_ Date \_\_\_\_\_ Map McLaurin

State 28 County (or town) 18

Latitude: 311142N Longitude: 0890933 Sequential number: 1

Lat-long accuracy: 3 T. 3 S. R. 12 Sec 25 SW 1 NW 1

Local well number: 064 Other number: #6

Local use: 064 Owner or name: CAMP SHELBLY Address: \_\_\_\_\_

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

Use of water: (A) Air cond, (B) Bottling, (C) Comm, (D) Dewater, (E) Power, (F) Fire, (H) Dom, (I) Irr, (M) P S, (N) Rec, (P) Stock, (S) Instat, (U) Unused, (V) Repressure, (W) Recharge, (X) Desal-P S, (Y) Desal-other, (Z) Other Z

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

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

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

Qual. water data; type: \_\_\_\_\_

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

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

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

#### WELL-DESCRIPTION CARD

SAME AS ON MASTER CARD Depth well: 400 ft Meas. 6 rept accuracy

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

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

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

Date Drilled: 9.5.0 Pump intake setting: \_\_\_\_\_ ft

Driller: Layne Central address \_\_\_\_\_

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. 100 Trans. or meter no. U

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

Alt. LSD: 2 Accuracy: 4

Water Level: 152.86 ft above MP; 153 ft below LSD Accuracy: 4

Date meag: 1/29 Yield: 164 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<sup>6</sup> Temp. \_\_\_\_\_ °F Date sampled \_\_\_\_\_

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

Well No.

GL

Latitude-longitude N  
S  
d m s d m s

HYDROGEOLOGIC CARD

SAME AS ON MASTER CARD

Physiographic Province: \_\_\_\_\_

013  
20 21

Section: \_\_\_\_\_

D  
22

Drainage Basin: \_\_\_\_\_

113Q  
23 25

Subbasin: \_\_\_\_\_

24

Topo of well site: (D) depression, stream channel, dunes, flat, hilltop, sink, swamp, (C) (E) (F) (H) (K) (L) (P) (S) (T) (U) (V) offshore, pediment, hillside, terrace, undulating, valley flat \_\_\_\_\_ 27

MAJOR AQUIFER: system \_\_\_\_\_ series T M \_\_\_\_\_ aquifer, formation, group H A \_\_\_\_\_ 28 29 30 31

Lithology: \_\_\_\_\_ S \_\_\_\_\_ Origin: \_\_\_\_\_ 3 \_\_\_\_\_ Aquifer Thickness: \_\_\_\_\_ ft 32 33 34

Length of well open to: \_\_\_\_\_ ft \_\_\_\_\_ Depth to top of: \_\_\_\_\_ ft \_\_\_\_\_ 35 37 38 40 41 43

MINOR AQUIFER: system \_\_\_\_\_ series \_\_\_\_\_ aquifer, formation, group \_\_\_\_\_ 44 45 46 47

Lithology: \_\_\_\_\_ \_\_\_\_\_ Origin: \_\_\_\_\_ \_\_\_\_\_ Aquifer Thickness: \_\_\_\_\_ ft 48 49 50

Length of well open to: \_\_\_\_\_ ft \_\_\_\_\_ Depth to top of: \_\_\_\_\_ ft \_\_\_\_\_ 51 53 54 56 57 59

Intervals Screened:

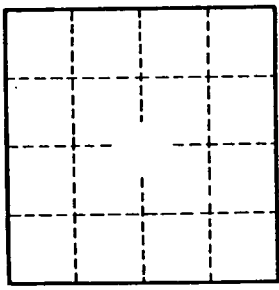
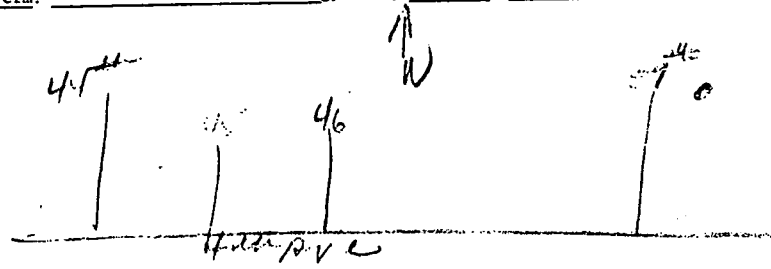
Depth to consolidated rock: \_\_\_\_\_ ft \_\_\_\_\_ Source of data: \_\_\_\_\_ 64

Depth to basement: \_\_\_\_\_ ft \_\_\_\_\_ Source of data: \_\_\_\_\_ 69

Surficial material: \_\_\_\_\_ Infiltration characteristics: \_\_\_\_\_ 70 71 72

Coefficient Trans: \_\_\_\_\_ gpd/ft \_\_\_\_\_ Coefficient Storage: \_\_\_\_\_ 73 75 76 78

Coefficient Perm: \_\_\_\_\_ gpd/ft<sup>2</sup>; Spec cap: \_\_\_\_\_ gpm/ft; Number of geologic cards: \_\_\_\_\_ 79



Well No. \_\_\_\_\_

28

**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.

1-23-96 AGN.

DEC 0 1995  
Office of Environmental Quality  
Office of Land and Water Resources  
FORM DEWR-104 (REV. 9/94)

Issued: <u>1-14-86</u>	Expires: <u>1-14-2006</u>	Fee Paid:	Permit No.
Lat. <u>31-11-43</u>	Long. <u>89-09-40</u>	Elev. <u>278</u>	USGS No.
Quad. <u>McFaurin</u>	ASCS Farm No.	STAC:	MSDOH No.
Aquifer: <u>MOCN</u>	Tract No.		Basin No. <u>03170007</u>
Remarks:			Dam Inv. No.

THIS APPLICATION IS FOR (Circle one):  NEW PERMIT  **RENEWAL** PERMIT NO. MS-GW-00310

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: S/B

**SECTION A** (to be completed by ALL APPLICANTS)

LANDOWNER: State of Mississippi-Mississippi Military Department  
(Name) (SSN or Tax ID No.)

NGMS-FMO, P. O. Box 5027  
(Address)

Jackson, MS 39296-5027 (City) (State & Zip) ( 601 ) 973 - 6238 (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 (City) (State & Zip) ( 601 ) 558 - 2690 (Telephone)

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

SW  1/4 of the NW  1/4 of Section 25, 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: Miocene MISSISSIPPI DEPARTMENT OF HEALTH NO.: 180002-06

2. Proposed work will begin on \_\_\_\_\_, 19\_\_\_\_, and will be completed by \_\_\_\_\_, 19\_\_\_\_.

If well has already been drilled, when was well completed (date)? 6 July, 19 53. Under whose name was well originally drilled (if known)? Annual Training Site, Camp Shelby

3. Description of proposed or completed well:

(a) DEPTH OF WELL: 400 feet. DRILLER: Layne Central Company, Jackson, MS

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

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

(d) PUMP: Type Turbine; Size 8 in; Capacity 900 gallons per minute; Setting depth 248.66 feet

(e) POWER UNIT: Type N/A; Size N/A horsepower

4. PERMITTED VOLUME :

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

(b) N/A 0.0 million gallons per day at a maximum rate of 900 gallons per minute

0.0

(CONTINUED ON BACK)

900

*NO MAP*

**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

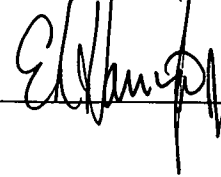
**SECTION E WATER USE DATA (ALL APPLICATIONS - complete section related to beneficial use)**

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 N/A or (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?  $\frac{N/A}{(Volume)}$   $\frac{N/A}{(Year)}$ ;  $\frac{N/A}{(Volume)}$   $\frac{N/A}{(Year)}$ ;  $\frac{N/A}{(Volume)}$   $\frac{N/A}{(Year)}$ ;  $\frac{N/A}{(Volume)}$   $\frac{N/A}{(Year)}$ ;  $\frac{N/A}{(Volume)}$   $\frac{N/A}{(Year)}$
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:** This well has no power or water main presently connected. It was drilled to permit expansion of the training site.

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

MAJ (P) E. L. Harrington, Jr.  
(Name)  
CSTS-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 Forest  
My commission expires July 21, 1999; Phonah B. McPhail Notary Public.

DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR  
PUBLIC SUPPLY WELLS PROJECT

GPS LOG

Hornbeak

McLaurin Quad  
6/6/96

USER NAME(S): SH Bishop & CA Hornbeak DATE: ~~6-9-94~~

UNIT DEQ #: 82859 / 82859 FILE #: B060619D  
A060919C

HEALTH DEPT. #: 180002-06 ELEV. 220

USGS #: 2-098 G6 OLWR #: 310

OWNER: Camp Shelby

LOCATION: NW / SW-NW S 35 T 3N R 12W COUNTY: Forrest  
Gate House

LOCATION DESCRIPTION: Go 1.2 mi East of (East Gate) on Lee Ave.

Turn Right (South) Go .1 mi well on Left.

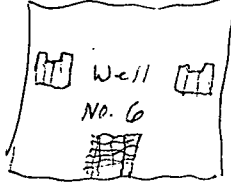
CASING DIA: 12" PUMP TYPE & SIZE: Large Elec. with Back-up Diesel

GFS FIELD LOCATION: LAT. 31° 11.444 LONG. 89° 09.413  
31° 11.915 89° 09.623

GFS CORRECTED LOCATION: LAT. 31.19536885 LONG. 89.16144805

REMARKS: GPS at well

Block well House



E 398,250  
N 558,750

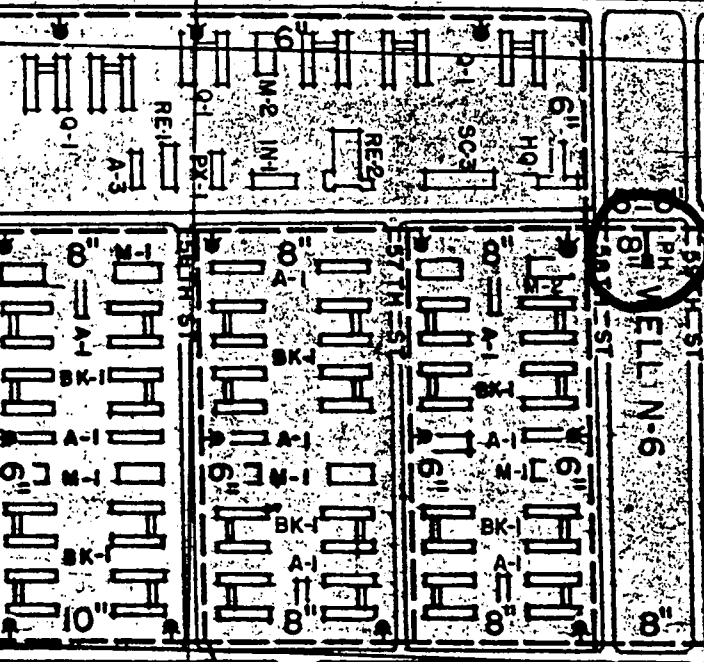
120

GRAVEL PIT

121

128

122



LIFT STA.  
NO. 6

PH. MELLIN-6

ST-1

61 ST

62 ND ST

60 TH ST

58 ST

59 ST

57 TH ST

57 TH ST

Mc Jarrin Quad

