

USGS well schedule missing

**WELL SCHEDULE
FOR
THE OFFICE OF LAND AND WATER RESOURCES**

Fips: 41

Well: L29

Log No: _____

Recorded by: Pat P Data Source: Driller's log, permit Date: 3/16/2001

County: Greene Permit No.: GW15042 DOH No.: 0210002-05

Quad: Leakesville Elevation: 230

1/4: _____ 1/4: SW 1/4: NE 1/4: SW Sec.: 33 T: 3N R: 6W

Plotted on quad? In field? From drillers log? _____ From permit? _____

Latitude: 31° 10' 44.8" Longitude: 88° 35' 56.1" GPS? From quad? _____

Primary Aquifer: MOCN (from permit) Secondary Aquifer: _____

Use: MU Well status: _____ Local Well Name: _____

Owner: Town of Leakesville

Date completed: 2/7/97 Driller: Griner Drilling Co. Well depth: 276 Hole depth: 1033

Pump type: Turbine Power type: Electric Pump capacity: 320 gpm

Screen interval: _____ Screen length: _____ Screen diameter: _____

Screen interval: _____ Screen length: _____ Screen diameter: _____

Casing interval: _____ Casing length: _____ Casing diameter: _____

Casing interval: _____ Casing length: _____ Casing diameter: _____

Type of logs: _____ Log interval: _____

Initial water level(l/s): _____ Date: _____ Measuring point description: _____

Water Quality Data? _____ Source: _____ Reliability: _____

Water Level Data? _____ Source: _____ Reliability: _____

Pump Test Data? _____ Source: _____ Reliability: _____

Water Use Data? _____ Source: _____ Reliability: _____

Water level data

This area for location map and notes

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY
Bureau of Land and Water Resources

P. O. Box 10631
Jackson, MS 39289-0631
WATER WELL DRILLERS LOG

311042/0893538

COUNTY WELL LOCATED Greene	
WELL NUMBER L 29	CODED
DATE WELL COMPLETED 02-07-97	

PERMIT NUMBER 15042
NAME OF DRILLING FIRM Griner Drilling
Service, Inc.

NAME & MAILING ADDRESS OF LANDOWNER			
Town of Leakesville			
Town Hall			
Leakesville, MS <i>FELV 239</i>			
WELL LOCATION:	SEC	TOWNSHIP	RANGE
<i>SE NW</i>	33	3 <i>[N]</i>	6 <i>[E]</i>
DISTANCE	DIRECTION	NEAREST TOWN	
5 Miles	NW	of Leakesville	
OTHER LANDMARK			
across from prison on Hwy. 63			
WELL PURPOSE: Home, Irrigation, Municipal, Industrial, Fish Pond, etc.			
Municipal			

PUMP DATA		
PUMP TYPE (Circle One): Submersible, <input checked="" type="checkbox"/> Turbine, <input type="checkbox"/> Jet, <input type="checkbox"/> Flowing Well, Other (Describe) _____		
POWER TYPE (Circle One): <input checked="" type="checkbox"/> Electric, <input type="checkbox"/> Tractor, <input type="checkbox"/> Diesel, <input type="checkbox"/> Gasoline, <input type="checkbox"/> Butane, Other (Describe) _____ H/P 25		
Pump Capacity (GPM)	No. of Stages	Setting Depth
320	10	230 FT.
PUMP TEST		
Well yielded 302 GPM with a drawdown of 28.35 ft. after 8 hours of pumping		

WELL DATA		
Well Depth	Casing Diameter (In.)	Casing Length (Ft.)
276	16	226
Type of Casing	Hole Depth	Depth to Static Water Level
steel	1033	108
TYPE OF COMPLETION: (Circle One or More): <input checked="" type="checkbox"/> Gravel Packed, <input type="checkbox"/> Underreamed, <input type="checkbox"/> Telescoped, <input type="checkbox"/> Natural Development, <input type="checkbox"/> Open Hole, <input type="checkbox"/> Other (Describe) _____		
Top of Lap Pipe or Reduction in Casing		
+2 FEET	IF TELESCOPED OR MORE THAN ONE SCREEN: USE BACK PAGE	

LOG DATA	
TYPE OF LOG RUN (Circle One): <input type="checkbox"/> No Log Run, <input checked="" type="checkbox"/> Electric, <input type="checkbox"/> Gamma Ray, <input type="checkbox"/> Density, <input type="checkbox"/> Sonic, <input type="checkbox"/> Neutron, Other (Describe) _____	
Name of Organization Running Log	
Griner Drilling Service, Inc.	

SCREEN DATA		
Diameter - Inches	Length - Feet	Slot Size - Inches
10	40	0.016
Screen Type	Depth to Bottom - Feet	
Rod base	276	

GEOLOGIC DATA (Office Use Only)			
Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test
Driller's Remarks Well No. 8			

DESCRIPTION OF FORMATIONS ENCOUNTERED	FROM	TO	FORMATIONS (Continued)	FROM	TO
Sand & gravel	0	89			
Clay	89	132			
Sand	132	168			
Clay	168	237			
Sand	237	282			
Clay w/ sand streaks	282	451			
Sand	451	483			
Clay	483	543			
Sand	543	598			
Clay w/ sand streaks	598	804			
Clay & sand streaks	804	1033			

RECEIVED

FEB 10 1997

Dept. of Environmental Quality
Office of Land & Water Resources

IF MORE SPACE IS NEEDED, USE BACK

15042

The box below is for office use only. MOCN

RECEIVED

Issued: <u>2-13-96</u>	Expires: <u>2-13-2006</u>	Fee Paid	V	Permit No. <u>GW-15042</u>
Lat. <u>3140-42</u>	Long. <u>88-35-58</u>	Elev. <u>239</u>		USGS No. <u>JAN 12 1996</u>
Quad. <u>Leakesville</u>	Dist.			Basin No. <u>03170003</u>
STAC				Dept. of Environmental Quality
				Office of Land & Water Resources
				Dam app. No.

Dept. of Natural Resources, Bureau of Land and Water Resources, P.O. Box 10631, Jackson, MS 39289-0631

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

This application is for (circle one): GROUNDWATER SURFACE WATER

Beneficial Use (circle one or more): Irrigation Fish Culture Municipal Rural Water Association Industrial
 Recreation Institutional (Examples: Church, School) Commercial (Examples: Hotel, Restaurant) Livestock Standby
 Fire Protection Flood Protection Other: _____

LANDOWNER:

Town of Leakesville
 (Name) _____ (S/S or Tax ID No.) _____
 P. O. Box 1088
 (Address) _____
 Leakesville, MS 39451 (601) 394-2383
 (City) _____ (State and Zip) _____ (Telephone Number) _____

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

SAME
 (Name) _____ (S/S or Tax ID No.) _____
 (Address) _____
 (City) _____ (State and Zip) _____ (Telephone Number) _____

Location of diversion/withdrawal point (A suitable location map must accompany this application): Well No. 8

SE 1/4 of the NW 1/4 of Section 33, Township 3N, Range 6W, County Greene

Volume of water diverted/withdrawn (Choose "a", "b", "c", or "d" ["d" is for units other than those shown in "a", "b", or "c"]):

(a) 0.185 acre-feet per year at a maximum rate of 320 gallons per minute
 (b) .13 million gallons per day at a maximum rate of 320 gallons per minute
 (c) _____ acre feet of storage at normal pool
 (d) _____ per _____ at a maximum rate of _____

Construction of proposed work will begin on (date) _____, 19____ and will be completed by (date) _____, 1906.

Water will be used from (month) January to (month) December each year.

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 numbers.
1 @ prison @ 320 gpm #MS-GW 02454; 2 @ 320 gpm ea. for Town #MS-GW 02453 & MS-GW 02452

SECTION A (to be completed if application is for surface water source)

1. Source of water is from _____ which drains into _____ which drains into _____ which drains into _____
 2. Description of pump/diversion works:
 (a) Pump (size and type): _____ Power Unit (size and type): _____
 Lift: _____ feet Maximum capacity: _____ gallons per minute.
 (b) Name of storage reservoir: _____ Dam height: _____ feet.
 Surface area at normal pool: _____ acres. Storage capacity at normal pool: _____ acre-feet.

(Continued on back)

SECTION B (to be completed if application is for groundwater source) (PROPOSED)

- Source of water is _____ aquifer.
- Description of proposed water well:
 - DEPTH OF WELL: 740 feet. DRILLER (name): To be bid for public contract
 - SURFACE CASING: Length: 700 feet. Diameter: 10 inches. Type: Steel
 - SCREEN: Length: 40 feet. Diameter: 6 inches. Type: Stainless Steel
 - PUMP: Type: Deep well turbine Size: 8" Capacity: 320 gallons per minute.
Number of stages: 10 Setting depth: 220' feet.
 - POWER UNIT: Type: Electric Size: 40 Hp horsepower.
 - TYPE OF COMPLETION: Gravel packed; Encasement grouted entire depth

WATER USE DATA:

If for IRRIGATION, FISH CULTURE or any other areal use, show the number of acres to which water will be applied in the appropriate 40-acre block(s). Acreage must be shown on accompanying location map.

TOWN-SHIP	RANGE	SEC-TION	NE1/4				NW1/4				SW1/4				SE1/4				TOTALS
			NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	

- IRRIGATION: List the number of acres of each crop to be irrigated: Rice _____; Cotton _____; Soybeans _____; Corn _____; Pasture _____; Truck _____; Wheat _____; Oats _____; Grain sorghum _____; Other (specify) _____ Acres _____
- FISH CULTURE: Explain how water will be used: _____
How often will reservoir(s) be emptied and refilled? _____
- MUNICIPAL or WATER ASSOCIATION (3-320 gpm wells serving prison facilities)
Choose "a" or "b". (a) The number of people served is 3,000. (b) The number of connections/customers is Prison
What is the estimated average daily consumption during periods of maximum use at the end of each five-year period during the next twenty years?

450,000	'96	450,000	'97	450,000	'98	450,000	'99
(Volume)	(Year)	(Volume)	(Year)	(Volume)	(Year)	(Volume)	(Year)
- INDUSTRIAL: If water is to be released into a watercourse, indicate the amount released each year _____
Rate of release _____; Location of release point in reference to diversion/withdrawal point _____
Explain any change in quality of water to be released: _____ NPDES Permit No. _____
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: _____

REMARKS: _____

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

A. Garner Russell
(Name)
A. Garner Russell & Associates, Inc.
(Address)
P. O. Box 1677, Gulfport, MS 39502
(City, State, Zip)
(601) 863-0667
(Telephone)

The accompanying map is hereby declared a part of this application. The TEN DOLLAR (\$10.00) permit fee is enclosed herewith.

[Signature]
(Signature)

Subscribed and sworn to before me this 10th day of January 1996 at Greene
County of Mississippi My commission expires City Clerk, Hattiesburg, MS
Peggy S. Cooley, Notary Public

DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR
PUBLIC SUPPLY WELLS PROJECT

GPS LOG

USER NAME(S): AH / MD DATE: 10-26-99
UNIT DEQ #: _____ FILE #: A102616A
HEALTH DEPT. #: N. Tag (210002-05) ELEV.: 230
USGS #: L-29 OLWR #: GW-15042
OWNER: Town of Leaksville QUAD: Leaksville
LOCATION: SW/NE/SW S33 T3N R6W COUNTY: GREENE
LOCATION DESCRIPTION: ^{TAKE} 63N. 60 3 mhs. Well Beside BP station on Rt.

CASING DIAM: 6inch PUMP TYPE AND SIZE: Turbine / 30HP
GPS FIELD LOCATION: LAT: 31 10.763N LONG: 88 35.934W
GPS CORRECTED: LAT: 31.179107246 LONG: 88.598915108
REMARKS: _____

