

DN # 021000 4-01

GW01306

FORM 9-1642 (1-68)

Well No. N 36

WELL SCHEDULE

Elog # 106

U. S. DEPT. OF THE INTERIOR

GEOLOGICAL SURVEY

WATER RESOURCES DIVISION

PUNCHED FEB 7 1975

MASTER CARD JCM

Bowl

Record by WTR Source of data Obs driller Date 10/71 Map Neely

State 28 County (or town) GREENE 21

Latitude: 31 09 50 N Longitude: 08 84 51 W Sequential number: 1

Lat-long accuracy: 2 T. 20 S. R. 8 Sec. 1 NW, NE, SW, SE

Local well number: N 036 B C 0102 N 08 W Other number: _____

Local use: 184 Owner or name: NEELY UTIL. INC

Owner or name: NEELY UTILITY Address: _____

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

Use of water: Air cond, Bottling, Comm, Dewater, Power, Fire, Dom, Irr, Med, Ind, P S, Rec, Stock, Instit, Unused, Repressure, Recharge, Desal-P S, Desal-other P

Use of well: Anode, Drain, Seismic, Heat Res, Obs, Oil-gas, Recharge, Test, Unused, Withdraw, Waste, Destroyed W

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

Hyd. lab. data: _____

Qual. water data; type: _____ USGS 6/72

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

Aperture cards: _____

Log data: Elog 6' - 312' D.E

WELL-DESCRIPTION CARD

SAME AS ON MASTER CARD Depth well: _____ ft 300 Meas. 3

Depth cased: _____ ft 250 Casing type: _____; Diam. 8x8 in 8

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

Method drilled: (A) air rot., (B) bored, (C) cable, (D) dug, (H) jetted, (J) air rot., (P) air percussion, (R) reverse percuss., (T) trenching, (V) driven, (W) drive wash, (Z) other H

Date drilled: 10-24-71 9:7:1 Pump intake setting: _____ ft 208

Driller: GRINER COLUMBIA, MISS.

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

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

Descrip. MP 2" vent at 2.0' ft below LSD, Alt. MP _____

Alt. LSD: _____ 230 Accuracy: OK topo 4

Water Level: _____ ft above MP; _____ ft below LSD 4 Accuracy: _____

Date meas: D 7 1 Yield: _____ gpm 150 Method determined 4

Drawdown: _____ ft Accuracy: _____ Pumping period: _____ hrs _____

QUALITY OF WATER DATA: Iron _____ Sulfate _____ Chloride _____ Hard. _____

Sp. Conduct 225 K x 10⁶ 2 Temp. 21.5 Date sampled 672

Taste, color, etc. _____

TRANSMITTED FOR ADP

Well No. N 36

12.8
138
9.0
12.8
3.8
12.7
230
127
103

HYDROGEOLOGIC CARD

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

D Drainage **1130** Basin: _____ **Subbasin:** _____

(D) (C) (E) (F) (R) (K) (L)
Topo of well site: (D) (F) (S) (T) (U) (V) _____

offshore, pediment, hillside, terrace, undulating, valley flat

MAJOR AQUIFER: _____ **TM** _____ **HBRC** **HIA** _____

system series aquifer, formation, group

Lithology: _____ **US** Origin: _____ **3** Aquifer Thickness: **50** ft

50 Length of well open to: _____ ft **50** Depth to top of: _____ ft **250**

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: **4" S.S.**

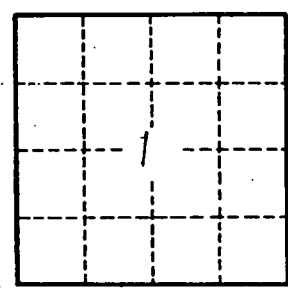
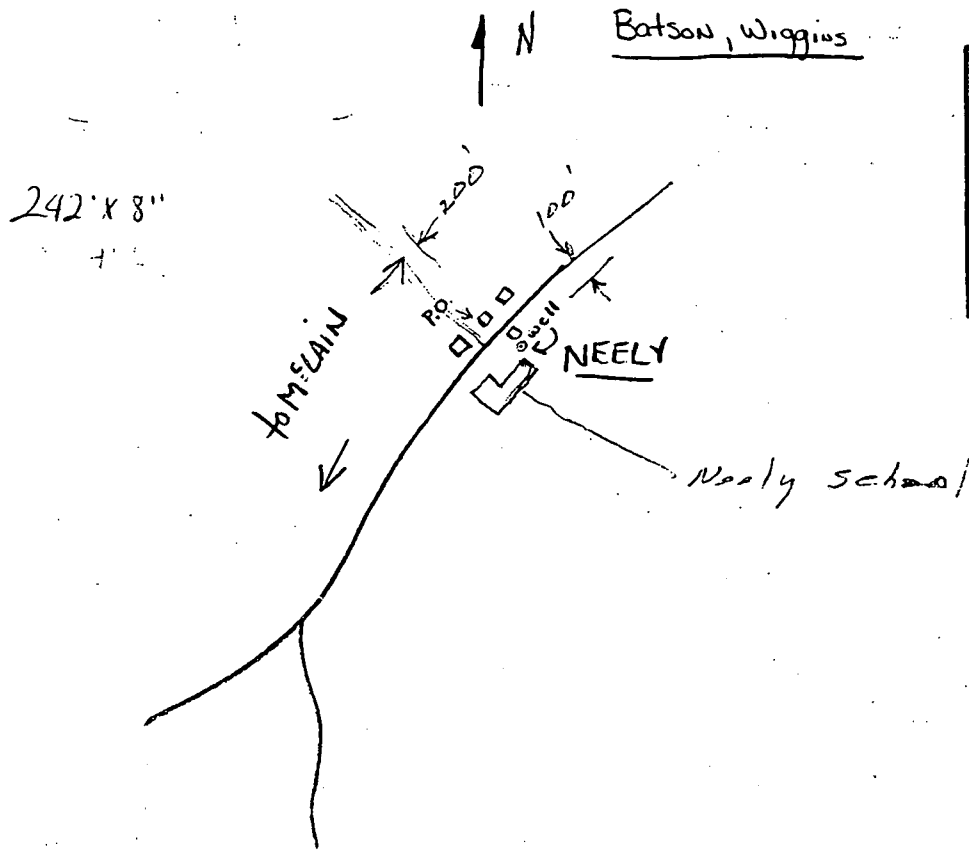
Depth to consolidated rock: _____ ft _____ Source of data: _____

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

Surficial material: _____ Infiltration characteristics: _____

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

Coefficient Perm: _____ gpd/ft²; Spec cap: **3.3** (24 hrs) _____ gpm/ft; Number of geologic cards: _____



Well No. **N30**

Greene
N 36
012-71

MISSISSIPPI
 BOARD OF WATER COMMISSIONERS
 416 North State Street
 Jackson, Mississippi 39201

DEC 1 1971

WATER WELL DRILLERS LOG

CODED

Dec 19 71 Griner Drilling Service Greene
 date well completed firm name county well located

LANDOWNER: Neely Utilities, Inc.
Neely, Miss
 (mailing address)

WELL LOCATION:
 sec. 1 T. 21 N. R. 8 E. S. 0
0 miles 0 of Neely
 (distance) (direction) (nearest town)

WELL PURPOSE: Municipal
 (home, irrigation, municipal, industrial)

WELL COMPLETION DATA:
 (1) diameter (inches) 8 x 4
 (2) total depth (feet) 300'
 (3) static water level (feet) 114 below above top of ground.
 (4) casing Steel, 242,
 (material) (depth)
8 If telescope see back.
 (size)
 (5) screen 50, 250
 (length) (depth to top)
4, 304 S.S.
 (size) (material)
 (6) pump 15, 125
 (HP) (yield gpm)
Elec
 (type power)
 (7) electric log yes
 (yes or no)
MCS
 (organization running log)
 (8) how well bottom plugged Back
Wash Valve

description of formations encountered	from	to
Top Soil	0	4
Sand & Clay streaks	4	20
Clay	20	82
Sand	82	102
Clay & Sand streaks	102	192
Clay	192	245
Sand	245	298
Clay	298	312

CODED

DRILLERS REMARKS:

RECEIVED

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

AUG 04 1995

DEPARTMENT OF ENVIRONMENTAL QUALITY, OFFICE OF LAND AND WATER RESOURCES P.O. BOX 10631, JACKSON, MS 39289-0631; (601) 961-5203

This box is for office use only. 2-27-96 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, Dam Inv. No.

THIS APPLICATION IS FOR (Circle one): NEW PERMIT RENEWAL PERMIT NO. MS-GW-01306

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: rural w/a

SECTION A (to be completed by ALL APPLICANTS)

LANDOWNER: Neely Utilities Inc, (Name) KJ 64-052654 (SSN or Tax ID No.) Gen Del (Address) Neely, MS 39461 (City) (State & Zip) (601) 525-3886 (Telephone No.)

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

NO MAP

(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):

SW NW 1/4 of the SW NW 1/4 of Section 01, Township 02N, Range 08W, County Greene

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: mid-cene (Wattisburg form) MISSISSIPPI DEPARTMENT OF HEALTH NO.: HD# 21004-01
2. Proposed work will begin on ... 19... and will be completed by ... 19...
3. Description of proposed or completed well: (a) DEPTH OF WELL: 0300ft, DRILLER: Ginet Drilling Co. (b) SURFACE CASING: Length ... feet; Diameter 08 inches; Type stainless Steel (c) SCREEN: Length 050 feet; Diameter 04 inches; Type stainless Steel (d) PUMP: Type Hallslaff; Size Set 20hp; Capacity 127 gallons per minute; Setting depth 300 feet (e) POWER UNIT: Type ...; Size Set 20 horsepower
4. PERMITTED VOLUME: (a) ... gallons per minute (b) 0.013 .03 million gallons per day at a maximum rate of 127 gallons per minute

(CONTINUED ON BACK)

127

SECTION C (to be completed for SURFACE WATER SOURCE)

- Source of water is from micacene (Holloway farm) which drains into _____
which drains into Leaf river in closest to us
(major stream or river)
- Description of pump/diversion works:
Pump (size & type): Hollaschoff Jet Steel 20HP Power Unit (size & type): _____
Lift: _____ feet Maximum capacity: _____ 127 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 140
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)
Total gallons water used from 7-1-94 to 6-30-95 was 9,364,239,48
- 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:** _____

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

Eva Hillman
(Name)

Hc-1- Box 86
(Address)

Neely, MS 39461
(City, State, Zip)

(601) 525-3886
(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.

ms Eva T. Hillman
(Signature)

Subscribed and sworn to before me this 1st day of August, 1995, at Neely County of Greene

My commission expires June 30, 1997
My commission expires _____; Maithyana Johnson Notary Public.

DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR

PUBLIC SUPPLY WELLS PROJECT

GPS LOG

USER NAME(S): SH Bishop DATE: 8-4-94

UNIT DEQ #: 82859 FILE #: 1080420A

HEALTH DEPT. #: 210004-01 ELEV. 220

USGS #: N-9001 N-36 OLWR #: GW-1306

OWNER: Neely Utilities QUAD: Neely

LOCATION: NE/SW/NW S 1 T 24 R 8W COUNTY: Green

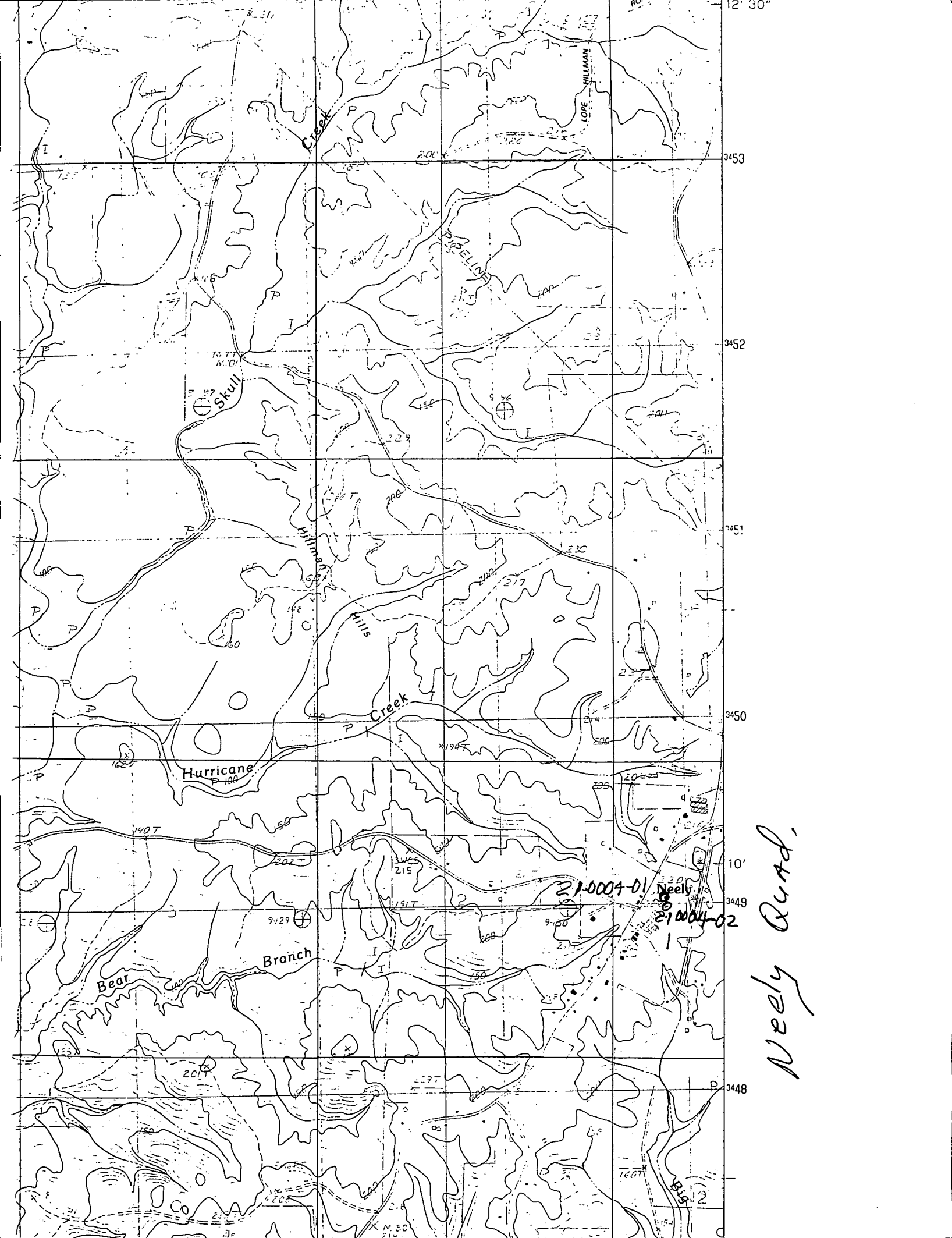
LOCATION DESCRIPTION: South side of old school
Neely MS

CASING DIA: _____ PUMP TYPE & SIZE: 20" Elect

GPS FIELD LOCATION: LAT. 31°09.922 LONG. 88°45.255

GPS CORRECTED LOCATION: LAT. 31.164938 LONG. 88.754316

REMARKS: GPS at well



3453

3452

3451

3450

3449

3448

Neely Quad.

21-0004-01
21-0004-02

Neely

Creek

PIPELINE

LOPE HILLMAN

Skull

Hills
Creek

Hurricane

Branch

Bear

10'

10'