

GW01911

WRD Exp. (GW)
April 1966

TRANSMITTED FOR ADP Well No.

H5

0230015-02

WELL SCHEDULE
GEOLOGICAL SURVEY

E-log #36
WATER RESOURCES DIVISION

PUNCHED

U. S. DEPT. OF THE INTERIOR

Dead Tiger Creek

MASTER CARD

Record by Roy Newcome Source of data Driller Date 4/17/64 Map topog 1:24,000

State 28 County (or town) Hancock 23

Latitude: 30 22 27 N Longitude: 08 9 37 30 Sequential number: 1

Lat-long accuracy: 1 T. 8 R. 16 Sec 5 NW SW, NE, SW

Local well number: H005 EAO508 SI6W Other number: Potable Well No. 2

Local use: 009 Owner or name: NASA - MTF

Owner or name: NASA MTF Address: Bay St. Louis, Miss.

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

Use of Air cond, Bottling, Comm, Dewater, Power, Fire, Dom, Irr, Med, Ind, P S, Rec, P

water: (S) (T) (U) (V) (W) (X) (Y) (Z) Stock, Inactit, Unused, Repressure, Recharge, Desal-P S, Desal-other, Other IT

Use of well: (A) (D) (G) (H) (I) (J) (K) (L) (M) (N) (O) (P) (Q) (R) (S) (T) (U) (V) (W) (X) (Y) (Z) W

DATA AVAILABLE: Well data 1 Freq. W/L meas.: C Field aquifer char. T

Hyd. lab. data: PCGU

Qual. water data; type: USGS

Freq. sampling: 6 mos. Pumpage inventory: S period: no

Aperture cards: DE

Log data: Driller, Electric

WELL-DESCRIPTION CARD

SAME AS ON MASTER CARD Depth well: 1481 ft Meas. rept accuracy 4

Depth cased: 1420 ft Casing type: Steel Diam. in 12

Finish: porous concrete, gravel w. (perf.), gravel w. (screen), horiz. gallery, open end, other G

Method Drilled: (A) air rot, (B) bored, (C) cable, (D) dug, (H) hyd jected, (J) air percuss, (P) rotary, (R) reverse, (T) trenching, (V) driven, (W) drive wash, other H

Date Drilled: 4/64 964 Pump intake setting: 32 ft

Driller: Carliss address Memphis, Tenn

Lift (type): (A) air, (B) bucket, (C) cent, (J) jet, (L) multiple, (M) multiple, (N) none, (P) piston, (R) rot, (S) submerg, (T) turb, other N Deep Shallow 40

Power (type): nat, elec, gas, gasoline, hand, gas, wind; H.P. 6 Trans. or meter no. 32

Descrip. MP Top of tee 1 7 ft above below LSD, Alt. MP 32

Alt. LSD: 25 25 Accuracy: (source) 4

Water Level 78.5 ft above below MP; Ft below LSD +86 Accuracy: 7

Date meas: 5/6/64 564 Yield: 1089 gpm Method determined 01

Drawdown: 78 ft Accuracy: 6 Pumping period hrs 06

QUALITY OF WATER DATA: Iron 0 Sulfate 1 Chloride 1 Hard. 0

Sp. Conduct 3 K x 10⁶ Temp. 87 °F Date sampled 10/29/65 065

Taste, color, etc.

Well No.

H5

Well No. H5

Latitude-longitude 30 22 27 ^N 089 37 30
d m s d m s

HYDROGEOLOGIC CARD

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

D Drainage Basin: 13V Subbasin: _____

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

MAJOR AQUIFER: system _____ series TM aquifer, formation, group PCGLL MZ

Lithology: 3S Origin: 3 Aquifer Thickness: 60 ft

Length of well open to: 60 ft Depth to top of: 63 ft

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: 1418-1481 .030"

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

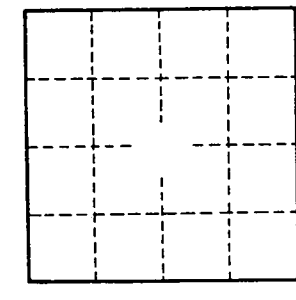
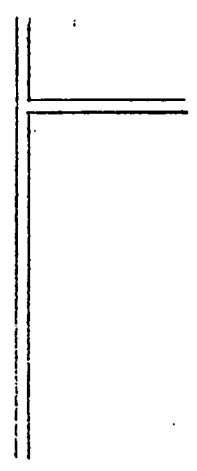
Depth to basement: _____ ft Source of data: _____

Surficial material: _____ Infiltration characteristics: _____

Coefficient Trans: _____ gpd/ft Coefficient Storage: _____

Coefficient Perm: _____ gpd/ft²; Spec cap: 14 gpm/ft; Number of geologic cards: _____

Casing 12x8
Screen 8" Carboss .030"
Gravel walled



Well No. H5

H 2086
7-64 H5

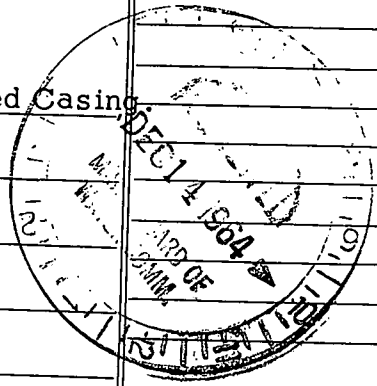
WATER WELL DRILLERS LOG

K

Date: July 7, 1964, Driller: Carloss Well Supply County Hancock
(Name)

	Description & Color of Materials Sand, Clay, Red Clay, Shell, etc.	Thick- ness Feet	Depth Feet
(1) Owner of Land: U.S. Army - Corps of Engineers - (Name) Miss. Test Facility, Miss.			
(Address) Potable Water Well # 2			
(2) Location: 1/4, 1/4, Sec. T R			
_____ miles _____ of _____ (distance) (direction) (Nearest Town)			
(3) Topography: Flat (Hilly) (Flat) (Level)			
(4) Purpose of Well: Industrial (Domestic Irrigation Municipal, Industrial, Other)			
Information upon completion of well:			
(1) Diameter 12" inches.			
(2) Total Depth 1481 feet.			
(3) Water Level Plus 78.5 feet below top of ground.			
(4) Cased to 1420', Size 12"			
(5) Screen: Size 8", Length 63'			
(6) Were any formations sealed against pollution?			
X yes, _____ no.			
If YES depth of formation Cemented Casing			
Why			
Drillers Remarks:			

SEE ATTACHED FORMATION TEST DATA SHEET



Well No.

(Use Back Side)

Mail this copy to Board of Water Commissioners 429 Miss. St. Jackson, Miss

**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. 5-28-96 AGN. FORM OLWR-AP-2 (REV. 9/94)

Issued: <u>3-11-86</u>	Expires: <u>3-11-2006</u>	Fee Paid:	Permit No.
Lat. <u>30-22-32</u>	Long. <u>89-37-29</u>	Elev. <u>25</u>	USGS No. <u>H5</u>
Quad. <u>Dead Sign Creek</u>	ASCS Farm No.	STAC.	MSDOH No. <u>230015-02</u>
Aquifer: <u>LPCGL</u>	Tract No.		Basin No.
Remarks:			Dam Inv. No.

THIS APPLICATION IS FOR (Circle one): RENEWAL PERMIT NO. MSGW-01911

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: Domestic Supply to Elevated Tanks

SECTION A (to be completed by ALL APPLICANTS)

LANDOWNER: National Aeronautics and Space Administration Tax ID #177
Roy S. Estess, Director Facility ID #1612300
(Name) (SSN or Tax ID No.)

John C. Stennis Space Center
(Address)

Stennis Space Center MS 39529-6000 (601) 688 2121
(City) (State & Zip) (Telephone No.)

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

F. Y. Kailiwai-Barnett, Director, Center Operations Tax ID #177
(Name) (SSN or Tax ID No.)

Building 1100
(Address)

Stennis Space Center MS 39529-6000 (601) 688 2004
(City) (State & Zip) (Telephone)

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

NE 1/4 of the SW 1/4 of Section 05, Township 08S, Range 16W, County Hancock

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: LPCGL Miocene Aquifer System MISSISSIPPI DEPARTMENT OF HEALTH NO.: 0230015-02

2. Proposed work will begin on _____, 19____, and will be completed by _____, 19____.
If well has already been drilled, when was well completed (date)? July, 1964. Under whose name was well originally drilled (if known)? _____

3. Description of proposed or completed well:
(a) DEPTH OF WELL: 1481 feet. DRILLER: Carloss Well Supply
(b) SURFACE CASING: Length _____ feet; Diameter (s) 12.8 inches; Type _____
(c) SCREEN: Length 63 feet; Diameter 8 inches; Type _____
(d) PUMP: Type Horiz. Centrif Size 30 HP; Capacity 600 gallons per minute; Setting depth Surface feet
(e) POWER UNIT: Type _____; Size _____ horsepower

4. PERMITTED VOLUME:
(a) _____ per year at a maximum rate of _____ gallons per minute
(b) 0.25 300 gallons per day at a maximum rate of 425 gallons per minute

(CONTINUED ON BACK) 425

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. Description 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 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 _____ 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?
(Volume) (Year); (Volume) (Year); (Volume) (Year); (Volume) (Year)

4. **INDUSTRIAL:** If the water is to be released into a water course, 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): Domestic Supply to Elevated Tanks

7. **REMARKS:** _____

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

Ronald G. Magee

(Name)

Building 1100

(Address)

Stennis Space Center, MS 39529-6000

(City, State, Zip)

(601) 688-7384

(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.

J. Kalvin Barnett

Director, Center (Signature)
Operations

Subscribed and sworn to before me this 12th day of Sept., 1995, at Hancock County of Mississippi

My commission expires May 12, 1997; *Boyd W. Wally* Notary Public.

DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR

PUBLIC SUPPLY WELLS PROJECT

GPS LOG

USER NAME(S): Horabek DATE: 8/20/96

UNIT DEQ #: 82859 FILE #: B082023A

HEALTH DEPT. #: 230015-02 ELEV. 25

USGS #: H-5 OLWR #: MB-GW 01911

OWNER: Matl. Space Technology Lab QUAD: Dead Tiger Creek

LOCATION: SW-NE-SW S 5 T 8S R 16W COUNTY: Hancock

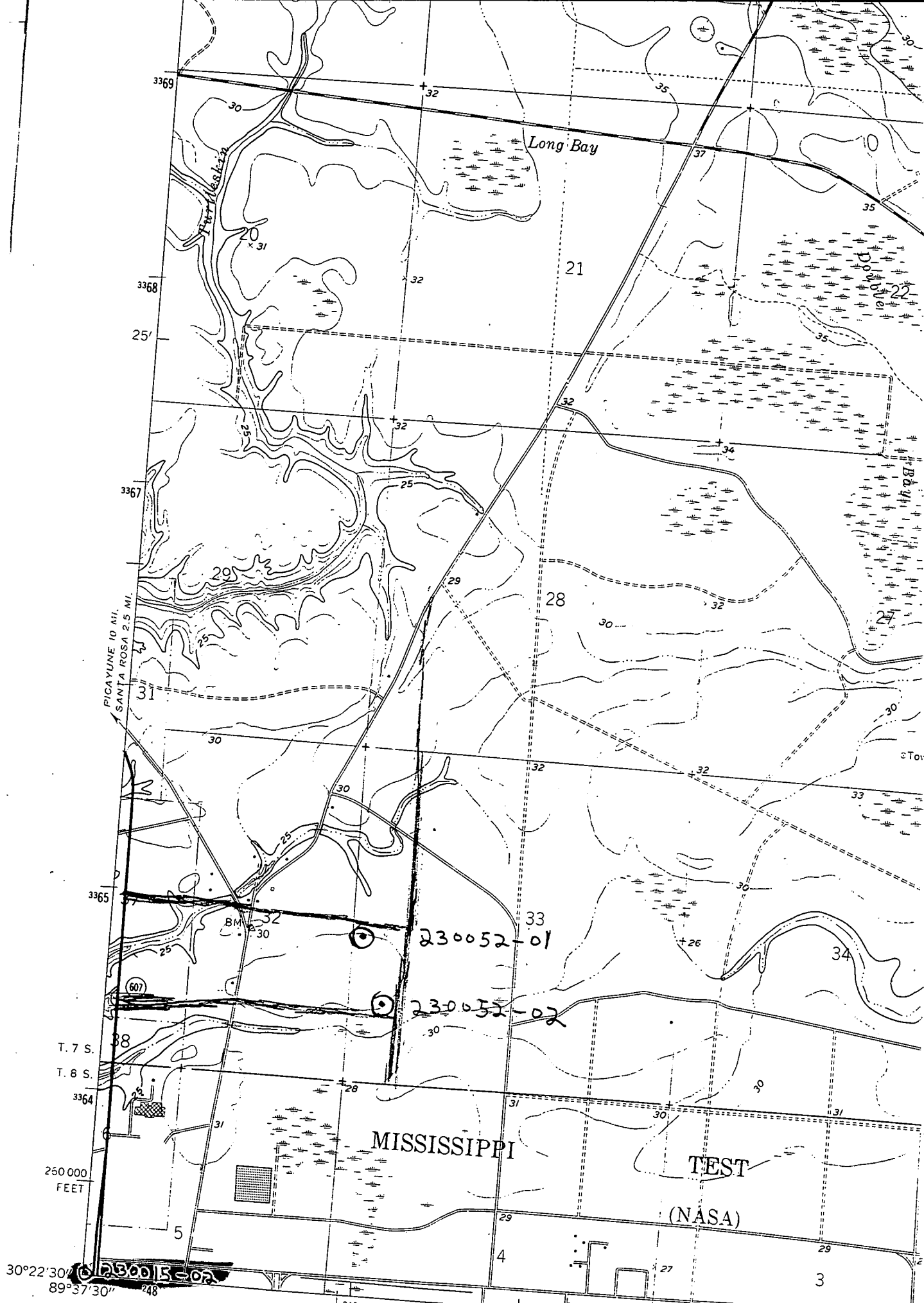
LOCATION DESCRIPTION: In Cement Bldg on South side of Elev. Tank on
west side of Shuttle Parkway (SW - of
with Saturn Dr. (Stennis Space Center) Intersection

CASING DIA: 16" PUMP TYPE & SIZE: HP Elec.

GPS FIELD LOCATION: LAT. 30° 22' 32.6" LONG. 89° 37' 29.4"

GPS CORRECTED LOCATION: LAT. 30.37566470 LONG. 89.62463823

REMARKS: GPS at Well,



Mapped, edited, and published by the Geological Survey
 Control by USGS and USC&GS
 Culture and drainage

(HAASWOOD)
 3044 1 SW