WELL SCHEDULE
U. S. DEPT. OF THE INTERIOR
GEOLOGICAL SURVEY
WATER RESOURCES DIVISION

MASTER CARD
Record by: T. H. Shaw Source of data: 15-605 Date: 7-6-57 Map: Bay St. Louis

State: 2-8 County (or town): 30, 18
Latitude: 30°19'00"N; Longitude: 89°20'18"W; Sequential number: 1

Lat-long accuracy: 12 degrees 10'18" sec. 12 degrees 10'18" sec.
Local well number: 088021; Other number:

Local use: BAY ST. LOUIS; Owner or name: City of Bay St. Louis

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

Use of water: Air cond, Bottling, Comm, Devater, Power, Fire, Dom, Irr, Med, Ind, P & S, Acc

Use of well: Am.
**HYDROGEOLOGIC CARD**

SAME AS ON MASTER CARD  Physiographic Province:  C 3  Section:  

Drainage Basin:  1B5 Subbasin:  

Topo of well site:  (D) depression, stream channel, dunes, flat, hilltop, sink, swamp, offshore, pediment, hillslope, terrace, undulating, valley flat  

MAJOR AQUIFER:  system  series  Aquifer, formation, group  

Lithology:  

Length of well open to: 

Origin:  

Depth to top of:  

Aquifer Thickness:  

MINOR AQUIFER:  system  series  Aquifer, formation, group  

Lithology:  

Length of well open to: 

Origin:  

Depth to top of:  

Aquifer Thickness:  

Intervals Screened:  

Depth to consolidated rock:  

Depth to basement:  

Infiltration characteristics:  

Coefficient Trans:  spd/ft  

Coefficient Perm:  spd/ft\(^2\)  

Source of data:  

Spec cap:  

Number of geologic cards:  

**UWL = 123 (1964)**

\(L = 1950\)
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) 961-5201

This box is for office use only.

Issued: 5-10-98 Expires: 3-10-2001 Fee Paid: X

LAT: 30° 19'-04" Long: 89° 20'-13"

Quad: BAY ST. LOUIS ASCS Farm No. STAC. MSDOH No.


Remarks: Dam Inv.

FORM OLR-WR-AP-2 (REV. 906)

THIS APPLICATION IS FOR (Circle one): NEW PERMIT RENEWAL PERMIT NO. 007349

THIS APPLICATION IS FOR (Circle one): GROUNDWATER COMPLETE A,B,E ST. CHARLES WELL

SURFACE WATER - COMPLETE A,C,D,E

BENEFICIAL USE (Circle one or more): 1) Public Supply. 2) Municipal, Rural Water, or Private Water 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:

SECTION A (to be completed by ALL APPLICANTS)

LANDOWNER: CITY OF BAY ST. LOUIS 64-6000139

(Name) (SSN or Tax ID No.)

P.O. BOX 2550

(Address)

BAY ST. LOUIS, MS 39221 (228) 467-2724

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

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

SAME AS ABOVE

(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): W 1/4 of the S 1/4 of Section 30, Township 8 S, Range 13 W, 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: UPPER PASCAGOUA MISSISSIPPI DEPARTMENT OF HEALTH NO: ________________

2. Proposed work will begin on ________________ and will be completed by ________________.

If well has already been drilled, when was well completed (date)? ________________. Under whose name was well originally drilled (if known)? CITY OF BAY ST. LOUIS

3. Description of proposed or completed well:

- Depth of Well: 1150 feet
- Driller: C.T. SWITZER
- Surface casing: Length ___________ feet; Diameter ___________ inches; Type STEEL
- Screen: Length ___________ feet; Diameter ___________ inches; Type ___________
- Pump: Type ___________; Size ___________; Capacity ___________ gallons per minute; Setting depth ___________ feet
- Power Unit: Type ___________; Size ___________; Horsepower ___________

4. PERMITTED VOLUME:

(a) ___________ acre-feet per year at a maximum rate of ___________ gallons per minute
(b) ___________ million gallons per day at a maximum rate of ___________ 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 IMPOUNDSMENTS (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 Smoothered
   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
   Choose “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 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.

WOODY STIEFFEL ___________________________
(Name)

P. O. BOX 2550 ___________________________
(Address)

BAY ST. LOUIS, MS 39521 ___________________________
(City, State, Zip)

228-467-8527 ___________________________
(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.

Ronald D. Young ___________________________
(Signature)

Subscribed and sworn to before me this 9th day of Dec., 1977, at Bay St. Louis, County of Hancock
My commission expires 4/3/2000 ___________________________ ___________________________
(Notary Public) Janet B. Durré
DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR
PUBLIC SUPPLY WELLS PROJECT
GPS LOG

USER NAME(S): Stewart / Everett
DATE: 10/12/95

UNIT DEQ #: _______________________
FILE #: A101215B

HEALTH DEPT. #: 280001-01
ELEV. 15'

USGS #: K4 OLWR #: GW07349

OWNER: Bay St. Louis
QUAD: Bay St. Louis

LOCATION: S 6663' S 30 T 8S R 13W
COUNTY: Hancock

LOCATION DESCRIPTION: 17 Chuck St. between 3rd and Hancock

CASING DIA: ___________
PUMP TYPE & SIZE: Turbine

GPS FIELD LOCATION: LAT. 30°18.091' LONG. 89°20.215'

GPS CORRECTED LOCATION: LAT. 30.30174492 LONG. 89.33692916

REMARKS: ____________________________