

NEW WELL

BAYLAND QUAD GW3666

Bayland

1/81.WTO

187

Recorded by DARDEN
Date 9-23-82

U.S. GEOLOGICAL SURVEY
WATER RESOURCES DIVISION
MISSISSIPPI DISTRICT

Well No. K-38
E-Log No. _____
County Hempstead

WELL RECORD

GEN. SITE DATA

Site ID 3 2 5 7 3 3 0 9 0 3 8 5 0 0 1 R=0* T=A* 2=W*

Data reliab. 3=C* Report. agency 4=USGS* Dist. 6=28* 7=28* Co. 8=053*

Lat. _____ Long. 9=32 57 33 * 10=09 03 85 0 * Well No. 12=K038

Location 13=SENE S 19 T 13 N R 04 W * Alt. 16=9.6 *

Hyd. Unit (OWDC) 20= * Date 21=09 12 31 1982 *

Well use 23=W * Water Use 24=I * Hole depth 27= * Well depth 28=110 *

WL 30=21 * Date 31=09 23 1982 * Source 33=5 *

Status 273= * Project No. 5= *

OWNER

R=158* T=A* Date 159#01 10 11 1980 * Owner No. _____

Owner 161#CHARLIE DARDEN *

FIELD QW

R=192* T=A* Date 193# / / * Temp. 196#00010* 197= *

R=192* T=A* Date 193# / / * Cond. 196#00095* 197= *

R=192* T=A* Date 193# / / * pH 196#00400* 197= *

CONSTR.

R=58* T=A* 59# 1 * Date 60=01 10 11 1980 * Remarks _____

Drig. 63= * Name _____ Method 65=R * Finish 66=S *

CASING

R=76* T=A* 59# 1 *

Top csng. 77# 0 * Bot. csng. 78= * Diam. 79# 1.6 *

R=76* T=A* 59# 1 *

Top csng. 77# * Bot. csng. 78= * Diam. 79# *

OPENINGS

R=82* T=A* 59# 1 * Top 83# * Bottom 84= *

Type 85= * Diam. 87= * Size 88= *

R=82* T=A* 59# 1 * Top 83# * Bottom 84= *

Type 85= * Diam. 87= * Size 88= *

YIELD

R= _____ * T=A* 147# 1 * Q 150= * Q/S 272= *

134 flows 146 pumped

LIFT

R=42* T= A * Lift type 43# T* Intake 44= Power type 45= D*

Date 38= 09/23/1982* H.P. 46=

LOGS

R=198* T= A * Log 199#* Top 200= Bot 201=

R=198* T= A * Log 199#* Top 200= Bot 201=

R=189* T= A * E Log No. 190# 191= M I S S I S S I D I S T *

ANAL.

R=114* T= A * Year 115# 117= 120=

AQUIFERS

R=90* T= A * 256# 1* Top 91= Bot 92=

Unit ID 93= 112MRYA* Name of Unit

R=90* T= A * 256# 1* Top 91= Bot 92=

Unit ID 93= Name of Unit

HYDRAULICS

R=98* T= A * 99# 1* Unit tested 100=

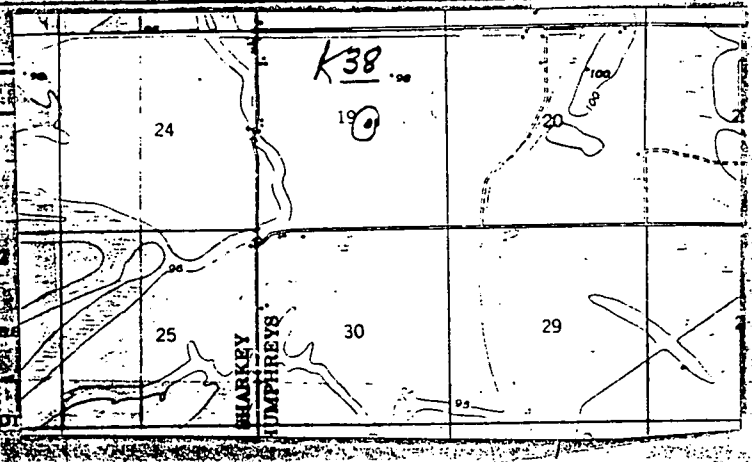
R=105* T= A * 99# 1* Test No. 106#

107= Transmissivity (gal/d)/ft

108= Hydraul. cond. (gal/d)/ft

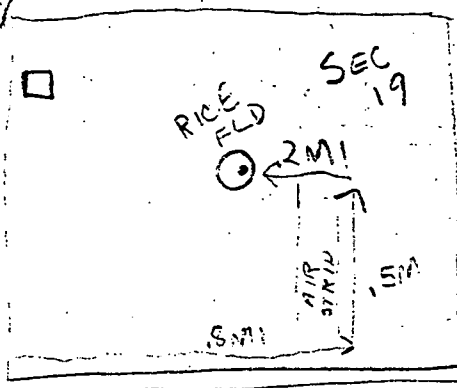
110= Storage coeff. Boundaries

R=121* T= H* Yr Begin 122# 1982* Network

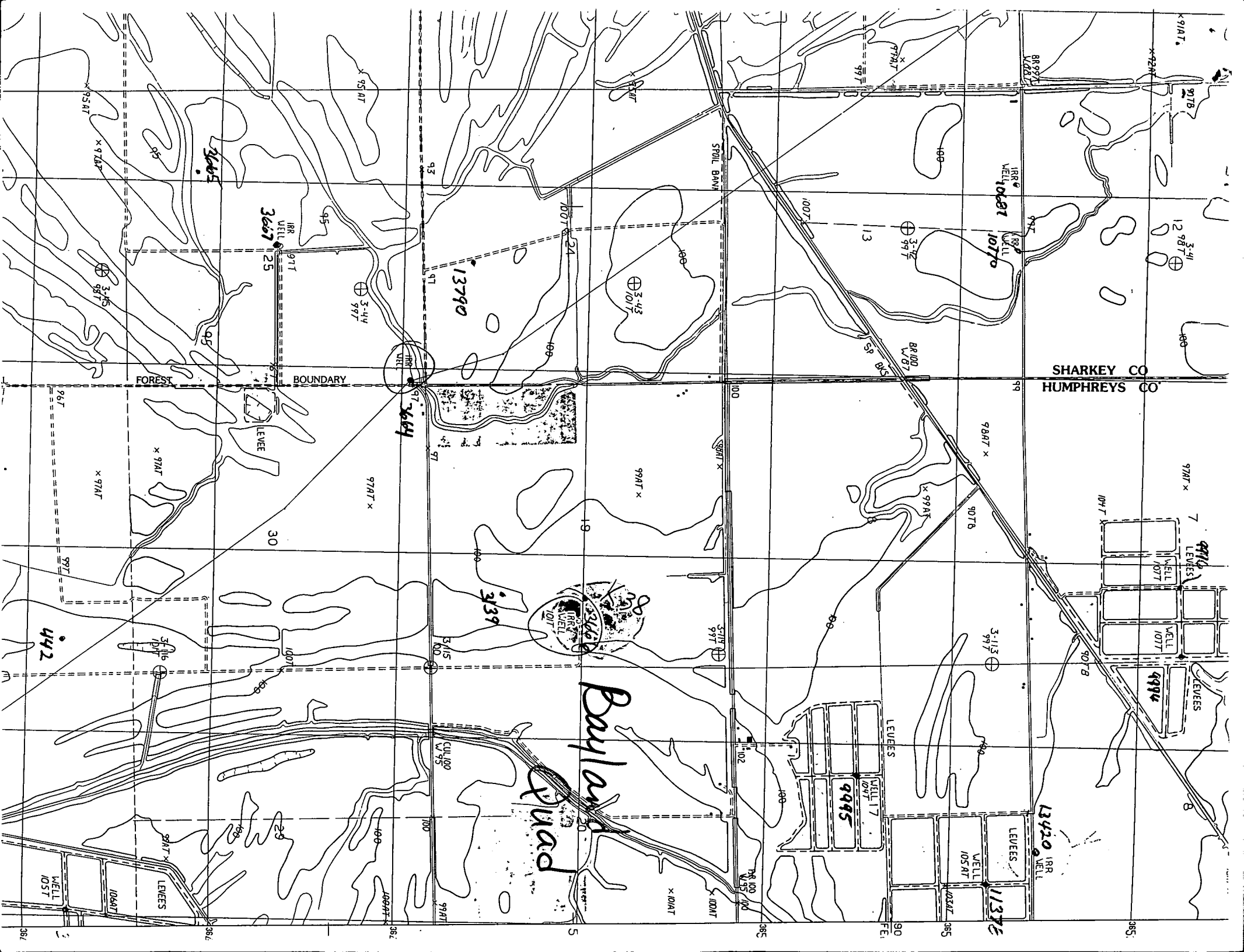


Water Level Data Collection (1) 9-23-82

34.00 HELD
 6.25 WET
 27.75
 6.50 MP= DISC PIPE
 21.25



GRAVEL RD



Baylands Quad

SHARKEY CO
HUMPHREYS CO

BOUNDARY

FOREST

LEVEES

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WELL 17
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97AT x

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NOTICE FOR RENEWAL OF 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
 PLEASE REPLY TO: YAZOO MISSISSIPPI DELTA JOINT WATER MANAGEMENT DISTRICT
 P.O. BOX 129, STONEVILLE, MS 38776; (601) 686-7712

January 13, 1998 Agenda

1-23-2008

9B

Issued: 10/28/1986	Expired: 10/28/1996	Farm number: 2188	Permit: GW-03666
Modified: //	Fee paid: 1271 0.00	Tract: 2221	Basin: 08030207
Latitude: 325731	Longitude: 903838	Stac: 0	Elevation: 101.00
Quad: BAYLAND	Aquifer: MRVA	USGS no.	Dist

SECTION A (to be completed by ALL APPLICANTS)

LANDOWNER:

Company _____
 Name *OK* W.B. HOLLOWAY
 (SSN or Tax ID No.) 428506688
 Address BOX 249

 Phone ROLLING FORK MS 39159
6018734343

Additional Contact
 Name _____
 Address _____
 City _____ St. _____
 Zip _____
 Phone _____

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

Company _____
 Name HOLLOWAY, W.B. *RKB Partnership*
 (SSN or Tax ID No.) 427-23-493 428506688
 Address BOX 249 RR 1 BOX 30

 Phone ROLLING FORK *ANGWILLA* MS 39159
6018734343 601-873-6818

RECEIVED

NOV 19 1996

YMD JOINT WATER
 MANAGEMENT DISTRICT

MS 39159
 38721

Location of diversion/withdrawal point

SW 1/4 of the NE 1/4 of Section 19, Township 13N, Range 04W, County SHARKEY

*Humphreys
 Humphreys*

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)

Beneficial Use
IR - Irrigation <u>IR</u>
FC - Fish Culture _____

1. Aquifer MRVA
2. Proposed work will begin on / / and will be completed by / /

If well has already been drilled, when was well completed (date)? 05/01/1980

Under whose name was well originally drilled (if known)? _____

3. Description of proposed or completed well

DEPTH OF WELL: 118.00 feet. DRILLER: DRIELING & ASSOCIATES
 SURFACE CASING: 80.00 feet.; Diameter 16.00 inches; Type STEEL
 SCREEN: Length 40.00 feet. Diameter 16.00 inches; Type STEEL
 PUMP: Type 60 HP Turbine; Size 14; Capacity 3000.0 gallons per minute;
 Setting depth 60 feet.
 POWER UNIT: Type Diesel; Size 60 Horsepower

4. PERMITTED VOLUME:

- (a) 720.00 acre-feet per year at a maximum rate of 2500 gallons per minute
- (b) 0.000 million gallons per day at a maximum rate of 0 gallons per minute

SECTION E

1. IRRIGATION: List the number of acres of each crop to be irrigated: Rice 240; Cotton 0
 ; Oats 0; Corn 0; Soybeans 240; Pasture 0; Truck 0; Wheat 0
 ; Grain Sorghum 0; Other crop _____; Acre 0; Other crop _____; Acre 0
 ; Other crop _____; Acre 0
 A. Method of Irrigation - Center Pivot Flood Furrow _____
 B. Land Condition - 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? _____

Signature Rod Brown

Subscribed and sworn to before me this 18 day of Nov, 1996, at Washington County of MS

My commission expires 10/19/97; Judith McLaugh Notary Public.

NC

2-17-92

COMPUTER INPUT DATA FORM FOR GROUNDWATER

Permit No. MS-GW-03666

Status Code E05

County Code 125 Sharkey

Water Management District _____

Date Notice Sent _____

Hydrologic River Basin 08030207

Notice Returned _____, Delivered _____
(date) (date)

Date Renewal Notice Sent _____

Date Application Rec'd 5/28/86

Date Renewal Application Rec'd. _____

Date Original Permit Issued 10/28/86

Date Renewal Permit Issued _____

Date Original Permit Expires 10/28/96

Date Renewal Permit Expires _____

Well No. _____

Date Use Verified _____ by _____

Applicant/User _____

Landowner/Permittee W. B. Holloway

Address _____

Address Box 249

Rolling Fork, MS 39159

Phone No. () _____

Phone No. () 873-4343

S/S or Tax ID No. _____

S/S or Tax ID No. 428-50-6688

Amount of water permitted 720 (AF/yr) or MGD @ maximum rate of 2500 gpm

Beneficial Use for Irrigation

Location: SW 1/4, NE 1/4, Section 19, Township 13 N, Range 4 W

Latitude: 32 57 31; Longitude: 90 04 09; Quadrangle: Bayland

38 38

Well Data:

Date Drilled 5/1/80

Initial depth to static water level _____ ft.

Surface elevation 98 101 ft.

Date initial depth measured _____

Depth 118 ft.

Initial yield _____ gpm

Casing diameter 16 inches

Casing length 78 ft.

_____ inches

_____ ft.

_____ inches

_____ ft.

Type of casing ST

Type of Completion _____

Screen Data:

Screen Diameter 16 inches Length 40 ft. Depth to bottom 118 ft.

_____ inches _____ ft. _____ ft.

_____ inches _____ ft. _____ ft.

Screen Type ST Slot size _____

Pump Data:

Geologic Data:

Type & size of pump 60hp

Geologic Unit MRVA MS River Alluvial Aquifer

Pump capacity 3000 gpm

Subsequent depth to Static Water Level _____

No. of stages 1

Date Subsequent Depth Measured _____

Setting Depth 60 ft.

Geophysical log _____

Water analysis _____

Aquifer test _____

Thickness of sand unit _____ ft.

Depth to top of unit _____ ft.

Well Driller Name Dreiling and Associates