

TRANSMITTED FOR ADP

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Date 3/21/77

U.S. GEOLOGICAL SURVEY
WATER RESOURCES DIVISION
MISSISSIPPI DISTRICT
WELL RECORD
MAY 1979

Well No. C11
E-Log No. 65
County ITAWAMBA

Site ID 342633088110601 R-0* T-A* 2-W*

Data reliab. 3-C Report. agency 4-USGS Dist. 6-28 7-28 Co. 8-057

Lat. Long. / 9-342633 10-0881106 Well No. 12-0011

Location 13-SW, NW, S 30, T 07 S, R 11 E Alt. 16-610

Hyd. Unit (OWDC) 20- Date 21-02/22/1977

Well use 23-W Water Use 24-P Hole depth 27-174 Well depth 28-162

WL 30-112 Date 31-10/11/1978 Source 33-S

Status 273-

R-158* T-A* Date 159# 02/12/1979 Owner No. Well #2

Owner 161-N, E, ITAWAMBA, W, A Middle well SW of Ridge Plant

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-

R-58* T-A* 59# 1* Date 60-02/12/1979 Remarks

Drig. 63-330 Name Herndon well Method 65-H Finish 66-5
+ Sup

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

Top csgn. 77# 0 Bot. csgn. 78-150 Dian. 79# 10

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

Top csgn. 77# 124 Bot. csgn. 78-141 Dian. 79# 6

R-82* T-A* 59# 1* Top 83# 141 Bottom 84-162

Type 85-S Diam. 87-6 Size 88-.025

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

Type 85- Diam. 87- Size 88-

R-146* T-A* 147# 1* Q 150-89 Q/S 272-

134 flows 146 pumped

GEN. SITE DATA

OWNER

FIELD CW

CONSTR.

CASING

OPENINGS

YIELD

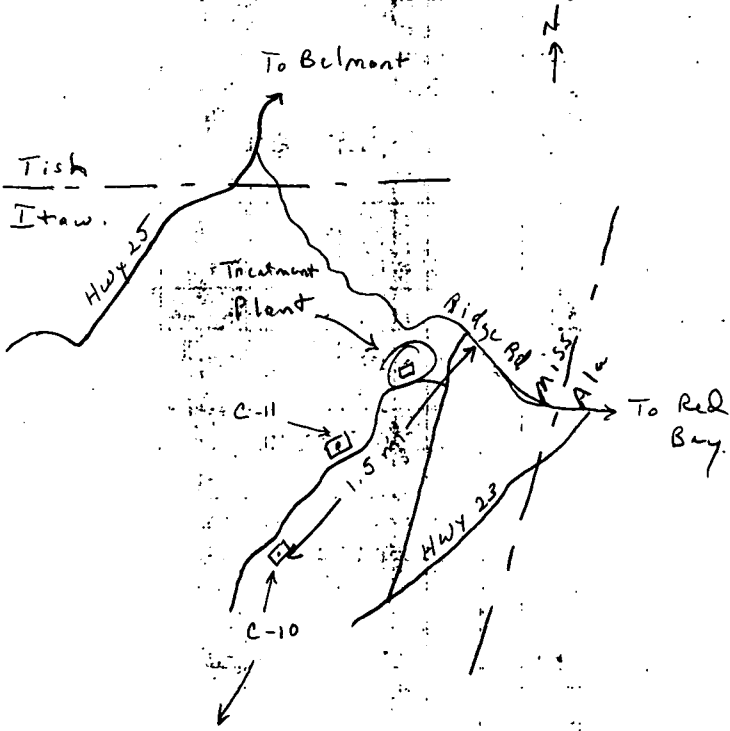
LIFT R=42* T= A * Lift type 43# T * Intake 44= * Power type 45= E *
 Date 38= 02/12/1979 * H.P. 46= 10. *

LOGS R=198* T= A * Log 199# D * Top 200= 0. * Bot 201= 1.70. *
 R=198* T= A * Log 199# E * Top 200= 1.0. * Bot 201= 1.74. *
 R=189* T= A * E Log No. 190# 065 * 191= M I S S D I S T *

ANAL. R=114* T= A * Year 115# * Type 120= *

AQUIFERS R=90* T= A * 256# 1 * Top 91= 1.20. * Bot 92= 1.70. *
 Unit ID 93= 21150RD * 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)/ft² _____
 110= * Storage coeff. Boundaries _____



This well + w.L. used 12/10/87
 110.45
 Elev 570

description of formations encountered	from	to
Red Clay	0	10
Sand	10	35
Rock	35	36
Clay	36	50
Sand	50	82
Clay	82	105
Rock	105	116
Sand	116	120
Rock	120	121
Gravel	121	132
Rock	132	133
Clay	133	140
Rock	140	141
Gravel	141	145
Rock	145	146
Gravel	146	170

CODED

Itawamba
C11
2/12/79

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

12 February 1979 Herndon Well & Supply, Inc. Itawamba
date well completed firm name county well located

LANDOWNER:	description of formations encountered	from	to
NE Itawamba Water Association, Inc. Well #1, Site #4	Red Clay	0	10
Fulton, MS (mailing address)	Sand	10	35
	Rock	35	36
	Clay	36	50
	Sand	50	82
	Clay	82	105
	Rock	105	116
	Sand	116	120
	Rock	120	121
	Gravel	121	132
	Rock	132	133
	Clay	133	140
	Rock	140	141
	Gravel	141	145
	Rock	145	146
	Gravel	146	170

LANDOWNER: NE Itawamba Water Association, Inc.
Well #1, Site #4
Fulton, MS
(mailing address)

WELL LOCATION:
sec. 30 T 7 N R 11 E
S W
1 miles West of Red Bay,
(distance) (direction) (nearest town)

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

- WELL COMPLETION DATA:
- (1) diameter (inches) 10 x 6
 - (2) total depth (feet) 162'
 - (3) static water level (feet) 125' below top of ground.
 - (4) casing Steel, 150' (material) (depth)
10" (size) if telescope see back.
 - (5) screen 20' 8" (length), 150' (depth to top)
6" (size), Stainless (material)
 - (6) pump 10 (HP), 89 (yield gpm)
Electric (type power)
 - (7) electric log Yes (yes or no)
MS Geo. Survey (organization running log)
 - (8) how well bottom plugged 6" BWV

Miss. Board of Water Comm.

FEB 20 1979

RECEIVED

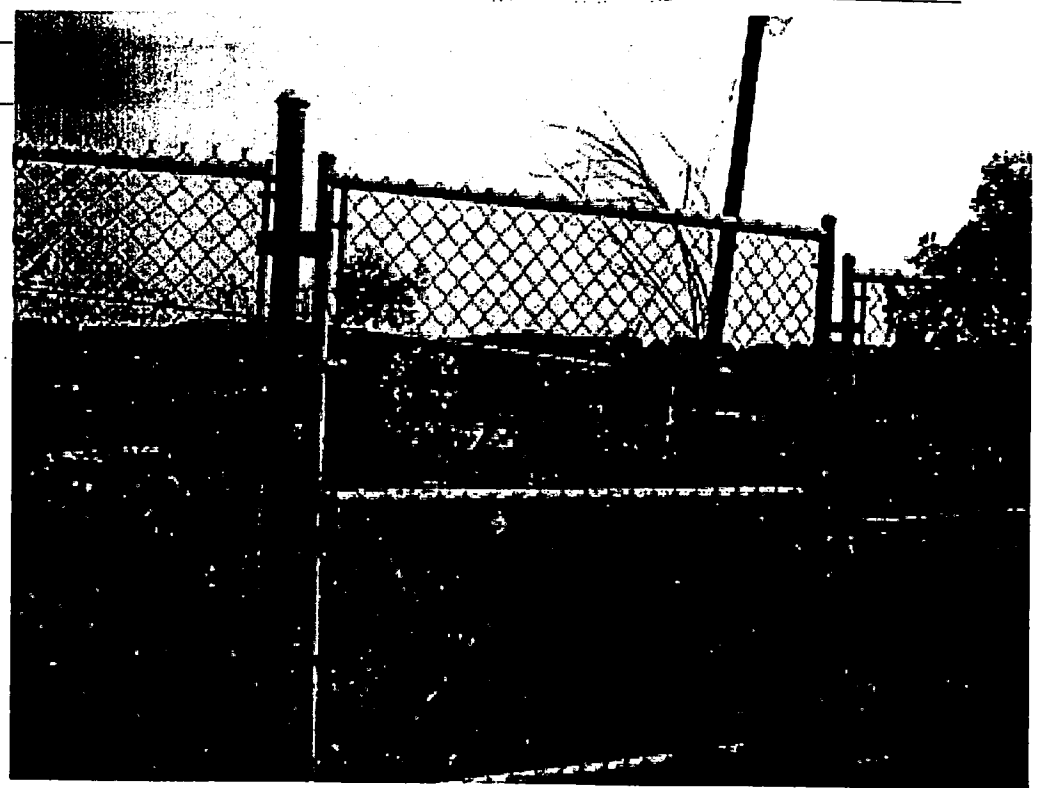
DRILLERS REMARKS:

DEPARTMENT OF ENVIRONMENTAL QUALITY - OLWR
PUBLIC SUPPLY WELLS PROJECT

GPS LOG

USER NAME(S): AH/IMO DATE: 6-9-99
UNIT DEQ #: _____ FILE #: A060915B
HEALTH DEPT. #: 290016-02 ELEV.: 610
USGS #: C11 OLWR #: GW03604
OWNER: NE Flawamba W. A. QUAD: Red Bay
LOCATION: ^{NE}/SW/SW/NW S 30 T 7S R 11E COUNTY: FLAWAMBA
LOCATION DESCRIPTION: Well located in sm. fence
of right side of rd. across from 2/5 story
house 1 miles S. of Treatment Pl.
CASING DIAM.: _____ PUMP TYPE AND SIZE: 546
GPS FIELD LOCATION: LAT: 34 28.589 N LONG: 88 11.150 W
GPS CORRECTED: LAT: 34.443127 LONG: 88.185793
REMARKS: GPS at well

p 281



**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.

FORM OLWR-AP-2 (REV. 9/94)

Issued: <u>10-28-86</u>	Expires: <u>10-28-2006</u>	Fee Paid:	Permit No. <u>MS-GW-03604</u>
Lat.	Long.	Elev.	USGS No. <u>C 11</u>
Quad. <u>Red Bay</u>	ASCS Farm No.	STAC.	MSDOH No.
Aquifer: <u>Gord</u>	Tract No.		Basin No.
Remarks:			Dam Inv. No.

THIS APPLICATION IS FOR (Circle one): NEW PERMIT **RENEWAL** PERMIT NO. MS-GW-03604

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: _____

RECEIVED
APR 26 1996
Dept. of Environmental Quality
Office of Land & Water Resources

SECTION A (to be completed by ALL APPLICANTS)

LANDOWNER: NORTHEAST ITAWAMBA WATER ASSOCIATION
(Name) (SSN or Tax ID No.)

10380 JOHN RANKIN HWY.
(Address)

FULTON, MS. 38843 (City) (State & Zip) (601) 585 - 3480 (Telephone No.)

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

(Name) (SSN or Tax ID No.)

(Address)

(City) (State & Zip) () (Telephone)

MAP SENT

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

SW 1/4 of the NW 1/4 of Section 30, Township 7S, Range 11E, County ITAWAMBA

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: _____ MISSISSIPPI DEPARTMENT OF HEALTH NO.: _____

2. Proposed work will begin on _____, 19____, and will be completed by _____, 19____.
If well has already been drilled, when was well completed (date)? _____, 19 79. Under whose name was well originally drilled (if known)? _____

3. Description of proposed or completed well:
(a) DEPTH OF WELL: 162 feet. DRILLER: HERNDON WELL & SUPPLY
(b) SURFACE CASING: Length 150 feet; Diameter 10 inches; Type STEEL
(c) SCREEN: Length 20.66 feet; Diameter 6 inches; Type STAINLESS STEEL
(d) PUMP: Type SUBMERSIBLE Size 10HP; Capacity 89 gallons per minute; Setting depth 157 feet
(e) POWER UNIT: Type FRANKLIN; Size 10 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 89 gallons per minute

(CONTINUED ON BACK)

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. Discription 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 Sorgum _____;
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 1500

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? 250,000 2000; 300,000 2005; 375,000 2010; 450,000 2015
(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.

STEVE HOLCOMB

(Name)

11584 JOHN RANKIN HWY.

(Address)

FULTON, MS. 38843

(City, State, Zip)

601-585-3300

(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.

Steve Holcomb

(Signature)

Subscribed and sworn to before me this 15 day of April, 19 96, at Ita County of MS

My commission expires _____ Reed Adams Notary Public.



MISSISSIPPI

VALLEY

DIVIDE

MISSISSIPPI
ALABAMA

BM H 6
575

Municipal Airport

Ridge Cem.

Water

Pumping Station

BM T 169 Reset
574

BM S 169
574

BM 26V 239
601

Banner
Community Center

BM 26V 238

Golf Course

Hospital

Gas

Trapezoid Cem.

Bates

Cem.

Pumping Station

WAMBA CO
NKLIN CO

REDBAY