

WATER WELL DRILLING/OPERATING PERMIT APPLICATION

Please complete all questions. Please print or type information or place an "x" in the appropriate space.

Drill _____ Equip _____ Complete or Alter _____

Owner _____ Phone _____

Address _____

Operator _____

Address _____

Engineer _____ Phone _____

Address _____

Driller _____ Phone _____

Address _____ License# _____

Location: County _____ 911 address of well site (attach map) _____

Well Location: Latitude _____ Longitude _____

Well is located _____ feet from the _____ (N,S,E,W) property line, and _____ feet from the _____ (N,S,E,W) property line.

Proposed water use: Public Water Supply ___ Industrial/Commercial ___ Irrigation ___ Poultry ___ Other (specify) _____

Describe make and model of flow meter to be installed and attach a drawing showing the installation design of the meter. _____

Proposed depth: _____ ft. Aquifer(s) where well is screened (if known) _____ Date drilling is to begin _____

Casing diameter (inside): _____ in. Proposed Screened interval: _____ - _____ (ft.) Proposed casing depth: _____ ft.

Proposed pump size (hp) _____ Proposed initial maximum production rate, open flow (gallons/minute) _____ gal/min.

A Hydrological Assessment Report is required for any well equipped to produce at more than 250 gallons per minute

Number of contiguous acres owned or covered by production rights used to establish production limits for this well _____.

Requested annual production volume (gallons) _____.

Information to support annual production amount requested:

No. of connections subject to this well _____ (If connected to another well in system, please describe below): _____

No. of Poultry Houses serviced by this well, if applicable _____. (Use would be for watering birds and cool cells).

No. of acres which will be irrigated by this water well (estimate as accurately as possible if not known) _____ acres.

Additional information you feel would be helpful in the Boards determination of the quantity of water you have requested above. You may add additional pages or information to help your case. _____

Total acreage subject to Operating Permit (This would be total area of contiguous acreage where the well will be producing water. If this is a PWS well, please provide map of CCN or enter territory in terms of acreage where water is provided):

_____Acres (Total contiguous acreage subject to production under this proposed permit)

If the place of use of the groundwater is outside of the district's boundaries, please indicate here with an "X": _____. The District boundaries are the political boundaries for Freestone, Leon, and Madison counties.

Attach copy of tax receipt for this tract or evidence of rights to produce from non-owned land. For municipal and other public water supply systems, state the total service area. Attach CCN or map of service area or utility boundaries.

Please read carefully and provide the following:

Attach a site map showing location of well on the tract and the names, addresses and phone numbers of all adjacent landowners. Attach a list of the owners of all registered wells located within 1,500 feet of the proposed well. Approval of a drilling permit authorizes applicant to complete the described well within 180 days. This drilling permit will expire 180 days after date of approval by the Board of Director's.

I agree that this well will be drilled as specified above and that I will furnish the District a driller's log, and mechanical log made and an application for an operating permit within 60 days following completion of this well. I agree not to produce from this well without a valid operating permit issued by the District. I agree to abide by the rules of the District and all lawfully issued orders of the District. All the information contained in the application is true and correct to the best of my knowledge. This application, when approved, shall remain in effect for one year following date of approval.

Signature of Applicant _____ Date _____

Printed Name: _____

Please include a Check or Money Order in the amount of \$100.00 with each application submitted.

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State of Texas
County of _____

This document was acknowledged before me on _____ by _____

_____.

Notary Public's Signature

(Personalized Seal)

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Permit application approved: _____

MID-EAST TEXAS GROUNDWATER CONSERVATION DISTRICT

By: _____

Date: _____