

**BREWSTER COUNTY GROUNDWATER CONSERVATION DISTRICT**

P.O. Box 465

Alpine, Texas 79831

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**APPLICATION FOR DRILLING PERMIT NON-EXEMPT MORE THAN 10 ACRES**

A \$500 non-refundable fee is required for non-exempt wells, with this application. THIS APPLICATION FORM MAY BE MAILED OR EMAILED. **Incomplete Applications will be returned to applicant. Brewster County Groundwater Conservation District is not responsible for incorrect information.**

**I. Applicant and Well Owner/Operator Information**

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Name of Applicant’s Authorized Agent, if any:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_ **Email:** \_\_\_\_\_

I, \_\_\_\_\_ the above described applicant, do hereby make application to the Brewster County Groundwater Conservation District for a permit to (check all that apply):

- drill a new well, as described more fully below;
- increase the size of an existing well, as described more fully below;
- increase the size of the pump on an existing well, as described more fully below; OR
- replace an existing well.

**Name of Well Driller:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Licensed Pump Installer to be used for pump installation:** \_\_\_\_\_

**Address of Pump Installer:** \_\_\_\_\_

**Texas State Well Pump Installer’s License No.** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Well Owner:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_ **Email:** \_\_\_\_\_

*If the applicant is an individual, the application may be signed by that individual or his duly appointed agent. If the applicant is a partnership, the applicant’s name should be followed by the words “a Partnership,” the application must be signed by at least one of the general partners who is authorized to bind all of the partners. If the applicant is a corporation or governmental entity, the application must be signed by a duly authorized official of the applicant. If the application is made by an estate, trust or guardianship, the application shall be signed by the duly appointed guardian, trustee, or representative.*

**Name of Owner's Authorized Agent, if any:** \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ **Email:** \_\_\_\_\_

**Well Operator, if other than Well Owner:** \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ **Email:** \_\_\_\_\_

**Name of Operator's Authorized Agent, if any:** \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ **Email:** \_\_\_\_\_

## **II. Well Location**

Physical Address of Well Location: \_\_\_\_\_

General description of well location (including acres owned, distance from all adjoining property lines, & distance from closest well): \_\_\_\_\_  
\_\_\_\_\_

Well Name if applicable: \_\_\_\_\_

Legal Description for Tract Where Well to be Located:

Section: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Acreage: \_\_\_\_\_ Subdivision: \_\_\_\_\_

GPS (in decimal) for Well Location: Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_

Distance from Property Lines: North \_\_\_\_\_ South \_\_\_\_\_ West \_\_\_\_\_ East \_\_\_\_\_

Distance to Nearest Well in feet/miles: North \_\_\_\_\_ South \_\_\_\_\_ West \_\_\_\_\_ East \_\_\_\_\_

Distance to Sewer Lines Septic Systems, feet/miles: \_\_\_\_\_

Does the proposed location meet setback requirements as set forth in rules of the TDLR for Water Well Drillers and Pump Installers, TCEQ and the District?  Yes  No

## **III. Well Information**

Proposed Well Use:

- Municipal/Commercial     Manufacturing/Industrial     Irrigation     Export  
 Domestic or Residential     Livestock     Other

Describe the proposed purpose of use: \_\_\_\_\_

Legal Authority under which Water will be Withdrawn from Well (e.g., exempt well, existing or applied for production permit): \_\_\_\_\_

State the proposed total amount of groundwater to be withdrawn from the well (or proposed well) per year in acre feet (325,851 gallons = 1 acre foot): \_\_\_\_\_

State the maximum rate of withdrawal that the well will be capable of in gallons per minute from Well: \_\_\_\_\_ gpm;

Identify the type of meter to be installed on the well (include name of manufacturer and model number): \_\_\_\_\_

Identify the intended total depth of proposed well: \_\_\_\_\_ feet;

Identify the intended total depth of well's cement casing: \_\_\_\_\_ feet;

Describe the cementing methodology to be used for the well: \_\_\_\_\_

Casing material:       Steel               PVC

Total depth of grout: \_\_\_\_\_ feet;

Identify the water bearing strata(s) from which the proposed well will be designed to make withdrawals: \_\_\_\_\_

External diameter of well casing: \_\_\_\_\_ inches

Internal diameter of well casing: \_\_\_\_\_ inches

Internal diameter of well bore: \_\_\_\_\_ inches

Depth of location of screen intervals: \_\_\_\_\_ feet;

Depth of location of perforation intervals: \_\_\_\_\_ feet;

Depth of location of filter pack intervals: \_\_\_\_\_ feet;

Predicted depth to water-bearing strata: \_\_\_\_\_ feet

Pump motor size: \_\_\_\_\_ hp;

Pumping method:       Submersible               Turbine       Jet       Piston               Other

Pump Power Source:  Electric       Diesel       Natural Gas       Windmill       Solar       Other

Source of groundwater (aquifer): \_\_\_\_\_

Any conservation-oriented methods of drilling to be used: \_\_\_\_\_

Date Drilling Anticipated to Begin: \_\_\_\_\_

If this is a replacement well, what will be the status of the old well?  Capped       Plugged       In use

If in use, explain: \_\_\_\_\_

Would you like this well to be used as a Monitoring Well:       Yes               No

If altering an existing well, is a copy of the Driller's log available?       Yes               No

Will the water produced from the well be used on the property where the well will be located?

Yes               No

If no, please identify where the water will be put to use: \_\_\_\_\_

Will the proposed well be sited on a location that fully complies with the well location and spacing requirements set forth in subchapters A and B of Chapter 6 of the District's Rules?

Yes               No

If no, please identify every instance of non-compliance: \_\_\_\_\_

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Pollution/waste will be prevented and groundwater will be conserved:  Yes               No

**IV. Supporting Documentation**

1. Please provide a copy of a city or county map with the location of the property on which the well is or will be located, highlighted and the location of the well pinpointed.
2. Please provide a copy of the recorded Deed verifying the applicant’s ownership of the well for which this applicant has filed.
3. If altering an existing well, please provide a copy of the driller’s log, if available.
4. If the application is signed by an agent, the agent must include or attach evidence documenting his or her authority to represent the applicant.
5. If the applicant is a corporation or governmental entity, please provide a copy of a resolution or other document evidencing authorization to make the application.
6. If the applicant is an estate or guardianship, a copy of the letters testamentary issued or order appointing guardian must be attached to the application.

**AFFIDAVIT**

STATE OF TEXAS §

COUNTY OF \_\_\_\_\_ §

Before me, the undersigned authority, on this day personally appeared

\_\_\_\_\_, who is authorized to submit the foregoing and attached Application and referenced attachments, and who after being by me duly sworn, upon oath and deposes that s/he has read the statements and information in the foregoing and above-described application and that every statement contained therein is within her/his own personal knowledge and belief and is true and correct.

Print Applicant Name \_\_\_\_\_

Applicant Signature \_\_\_\_\_

Subscribed and Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

**OR**

**With Photocopy of Photo ID Attached-sign below.**

Print Applicant Name \_\_\_\_\_

Applicant Signature \_\_\_\_\_

Driller Signature \_\_\_\_\_

District Use Only [Approval or Denial of this Application is subject to District Rules]

Exempt Well:  Yes  No     Production Permit required before drilling

Drilling Approved:  Yes  No

By: \_\_\_\_\_

Date: \_\_\_\_\_

Approved Drilling Registration Number:

\_\_\_\_\_

Payment Method: \_\_\_\_\_ check number: \_\_\_\_\_