



# Central Texas Groundwater Conservation District

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<b>District to Complete</b>
Grid _____
_____
Registration No. _____
_____
Operating Permit No. _____
_____
TDLR Tracking No. _____
Date Received: _____

## EXISTING WELL REGISTRATION

**Instructions:** Complete this form for any well that was in existence before September 1, 2009. Please answer all questions or statements that apply to the well or well system. Complete one registration for each well.

**Description:** This form is used to register an existing well. The information provided on this form will be used to determine if the well status is an Exempt Well or a Non-Exempt Well. Exempt well owners will be issued an Exempt Well Certificate. Non-Exempt well owners will be provided applications for an Operating Permit and Grandfathered Use Permit.

**Inspection:** District staff may need to inspect a well or well location. Property access for inspections is authorized by Section 36.123 of the Texas Water Code, and District Rule 8.1. Inspections may include confirming well location, measuring water level, inspecting metering equipment, confirming pumping capability, water sampling, geological survey, or any other well-related inspection activity deemed necessary by the District.

### Part I – Well Owner Information:

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

Mailing address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact person if different than above: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Registrant: \_\_\_\_\_ Phone: \_\_\_\_\_

*If Registrant is other than the owner of the property, complete an Agent Authorization form available at CTGCD office or from the website.*

Mailing address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

### Part II Well and Pump Information

#### Well Location:

Well Site Address (911 address): \_\_\_\_\_ City: \_\_\_\_\_

Legal Description: \_\_\_\_\_

Lot or Tract Size: \_\_\_\_\_ acres. Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_

#### Well Completion:

Is a copy of the original drillers log available?

Yes If yes, please attach and continue to the Pump Information section.

No If no, please provide as much information below as is known and any historic information about the well such as land owner name at time well was drilled. The District has access to old driller's logs and may be able to match the well log with the well by owner name and/or address at the time the well was drilled. Driller: \_\_\_\_\_

Date Well Was Drilled: \_\_\_\_\_ Total Depth: \_\_\_\_\_ Ft. Inside Diameter of Casing: \_\_\_\_\_ In.

Type of Casing:  Steel  Plastic.  Other: \_\_\_\_\_

Historical Information: \_\_\_\_\_

**Aquifer the well is producing from (if known):**  Trinity  Ellenburger  Granite/Granite Gravel  Hickory  
 Marble Falls  Welge-Lion Mountain



**Pump Information:**

Is a pump installed in the well?

No If No: Is the well capped?  Yes  No

Yes

Pump Size: \_\_\_\_\_hp Pump Depth: \_\_\_\_\_Ft.

Pumping capacity as installed and used: \_\_\_\_\_ gpm.  Estimated  Measured

**Part III Water Use Information**

**Nature and purpose of use** (check all that apply):

Domestic  Livestock  Public water supply  Irrigation  Industrial  Commercial  Other: \_\_\_\_\_

Is the groundwater withdrawn from the well used in a location different from the well site?  No  Yes

If yes, explain: \_\_\_\_\_

Will the groundwater produced be transported out of Burnet County?  No  Yes

If yes, explain: \_\_\_\_\_

Will a Lawn Irrigation System be attached to this Well?  No  Yes If yes, did the system exist before September 1, 2009?  Yes  No

**Amount of Annual Usage:**

Provide the amount of estimated or measured usage for this well only

Domestic \_\_\_\_\_ gallons (The estimated per person use for Burnet County is 135 gallons per day=49,250 gallons per year.)

Livestock \_\_\_\_\_ gallons per year

Public Supply \_\_\_\_\_ gallons or \_\_\_\_\_ Acre Feet per year

Irrigation \_\_\_\_\_ gallons or \_\_\_\_\_ Acre Feet per year

Commercial \_\_\_\_\_ gallons or \_\_\_\_\_ Acre Feet per year

Industrial \_\_\_\_\_ gallons or \_\_\_\_\_ Acre Feet per year

Other \_\_\_\_\_ gallons or \_\_\_\_\_ Acre Feet per year

**Water System:**

**Single well** This well provides all the water use and volume as identified above and is not connected to any other well or well system.

**Multi-Well** This well is connected to one or more other wells and together they provide the water use identified above. Provide the following information:

• Owner’s Well number or identifying name for this well: \_\_\_\_\_

• List all other wells in this well system by the Owner’s well number or name: \_\_\_\_\_

**Part IV Certification**

**Owner’s or Registrant’s Sworn Statement**

I hereby swear or affirm that the information given herein is true and accurate to the best of my knowledge and belief and will comply with the Central Texas Groundwater Conservation District Rules, its Management Plan and the Administrative Rules of the Texas Department of Licensing and Regulation (TDLR) 16, Texas Administrative Code, Chapter 76 well plugging guidelines. I further swear or affirm that water produced/withdrawn from this well will be put to beneficial use at all times. If any change is made to the well, the pump or the use of the water that would change the classification of this well I will notify the District and will apply for a permit that will meet the requirements of the Rules prior to making the change.

\_\_\_\_\_  
Owner’s Signature  
Printed Name: \_\_\_\_\_

\_\_\_\_\_  
Date

