EXISTING WELL REGISTRATION -*This form may be faxed or mailed*-

Coastal Plains Groundwater Conservation District
1801 7th Street cpgcd@att.net
Bay City, TX 77414
(979) 323-9170 www.coastalplainsgcd.com

District Use Only

Registration No._____

State Well No._____

Date: _____

Part I – Well Owner Information:

***Well Owner:** (if multiple Owners, attach list) _____

*Address:_____*City:_____*State:_____*Zip:_____

*Phone: _____Fax:_____Email:_____

Registrant: (if other than owner)_____Phone:_____

Address:_____City:_____State:_____Zip:_____

Phone: _____Fax:_____Email:_____

If Registrant is other than the owner of the property, the registrant should provide documentation establishing the applicable authority to register the well..

Part II – Well Location:

*Well Site Physical Address or Description (ex. Corner of CR 215 & 218):_____

City: _____State:____TX_____Zip:_____

*Latitude:_____(deg)_____(min)_____(sec) *Longitude:_____(deg)_____(min)_____(sec) (***if unknown/please attach map showing location.***)

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

If yes, explain:_____

Part III – Purpose for Water Use:

*Mark **(x)** all appropriate boxes:

- ☐ Public Supply (includes commercial)
- ☐ Industrial
- ☐ Irrigation (All Agricultural Use)
- ☐ Other (explain)_____
- ☐ Single-family dwelling. (includes lawn irrigation)
- ☐ Multi-family
- ☐ Livestock

Part IV – Well Information:

Estimated Maximum pumping capacity of well: _____gpm. Estimated depth of well: _____

*Total amount of groundwater to be used on an annual basis:_____gallons or acre ft./year. (circle one)

If the amount stated is less than 5,000,000 gallons per year and the district determines the well exempt under Rule 3.5 as domestic or livestock use, exceeding or pumping water for non-exempt purposes is a violation under the District Rules.)

Inside Diameter of the pump discharge pipe:_____Inside Diameter of Casing:_____

List Proposed Annual Usage. (*if agricultural crop irrigation, specify crop & acreage*):

Use _____ Amount Used _____gallons or acre ft./year. (circle one)

Use _____ Amount Used _____gallons or acre ft./year. (circle one)

Use _____ Amount Used _____gallons or acre ft./year. (circle one)

Use _____ Amount Used _____gallons or acre ft./year. (circle one)

Use _____ Amount Used _____gallons or acre ft./year. (circle one)

Part V – Certification:

Applicant agrees that water produced/withdrawn from the proposed well will be put to beneficial use at all times. **Yes** or **No**

I hereby certify that the information given herewith is true and accurate to the best of my knowledge and belief.

I hereby declare the well owner or authorized registrant will comply with well plugging guidelines & report closure to the District.

_____ _____ _____

Print Name Signature of Property Owner or Authorized Registrant Date

District Use Only

Will a permit be required for this registration? Yes or **No** **A permit application was provided to registrant on**:_____

*** Required Fields**