

# OPERATING PERMIT APPLICATION

## Coastal Plains Groundwater Conservation District

1801 7<sup>th</sup> Street cpgcd@att.net

Bay City, TX 77414

(979) 323-9170 (979) 245-5661 www.coastalplainsgcd.com

### District Use Only

Permit \_\_\_\_\_

Well No. \_\_\_\_\_

*Instructions: Complete this form for each well (type or print). Additional information or explanations may be attached.*

If application is for an existing well, briefly describe the history of use on this well, such as, the year the well was drilled, purpose for which well was drilled and the types of subsequent use of the water, etc.:

### 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: \_\_\_\_\_

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 – Well Information:

Maximum pumping capacity of well: \_\_\_\_\_ gpm Total Depth of well: \_\_\_\_\_ Ft.

Please List Screening Intervals: \_\_\_\_\_

**(If well not yet drilled, please have driller estimate.)**

Type of Pump: \_\_\_\_\_ Depth to pump setting: \_\_\_\_\_

Inside Diameter of the pump (discharge): \_\_\_\_\_ Inches Inside Diameter of Casing: \_\_\_\_\_ in.

Pump (or bowl) diameter: \_\_\_\_\_ Inches Horsepower: \_\_\_\_\_ hp

Status of this well as of application date: (Mark one with X)

☐ Operating

☐ Completed but not operating

☐ Being Drilled \_\_\_\_\_

☐ Awaiting permit to begin

Registration Form Primary Use Indicated: \_\_\_\_\_ Is this correct?

Yes or No (circle one)

If there are any changes or additions to the Primary Use of this well please mark (x) for all appropriate boxes:

☐ Public Supply (includes commercial)

☐ Single-family dwelling. (includes lawn irrigation)

☐ Industrial

☐ Multi-family

☐ Irrigation (All Agricultural Use)

☐ Livestock

☐ Other (explain) \_\_\_\_\_

**List Proposed Usage for 2023**(specify use & amount, if agricultural crop irrigation, specify crop & acreage):

Acres \_\_\_\_\_ Use \_\_\_\_\_ Amount Used \_\_\_\_\_ gallons or acre ft./year. (circle one)

Acres \_\_\_\_\_ Use \_\_\_\_\_ Amount Used \_\_\_\_\_ gallons or acre ft./year. (circle one)

Acres \_\_\_\_\_ Use \_\_\_\_\_ Amount Used \_\_\_\_\_ gallons or acre ft./year. (circle one)

**List Proposed Usage for 2024** (specify use & amount, if agricultural crop irrigation, specify crop & acreage):

Acres \_\_\_\_\_ Use \_\_\_\_\_ Amount Used \_\_\_\_\_ gallons or acre ft./year. (circle one)

Acres \_\_\_\_\_ Use \_\_\_\_\_ Amount Used \_\_\_\_\_ gallons or acre ft./year. (circle one)

Acres \_\_\_\_\_ Use \_\_\_\_\_ Amount Used \_\_\_\_\_ gallons or acre ft./year. (circle one)

**List Proposed Usage for 2025**(specify use & amount, if agricultural crop irrigation, specify crop & acreage):

Acres \_\_\_\_\_ Use \_\_\_\_\_ Amount Used \_\_\_\_\_ gallons or acre ft./year. (circle one)

Acres \_\_\_\_\_ Use \_\_\_\_\_ Amount Used \_\_\_\_\_ gallons or acre ft./year. (circle one)

Acres \_\_\_\_\_ Use \_\_\_\_\_ Amount Used \_\_\_\_\_ gallons or acre ft./year. (circle one)

Expected Production for Three Year Permit Term : \_\_\_\_\_ Gallons/Acre feet (circle one)

Will the groundwater withdrawn under this permit be used in conjunction with another Operating Permit?

☐ Yes ☐ No If Yes, explain: \_\_\_\_\_

Water Conservation Plan attached ☐ Yes ☐ No

If applicant is required by law to have a water conservation plan; a copy must be attached to application.

Drought Contingency Plan attached: ☐ Yes ☐ No

If applicant is required by law to have a drought contingency plan; a copy must be attached to application.

Briefly describe the method used for measuring annual water usage (GPM XHRS RUN, METER):

\_\_\_\_\_  
\_\_\_\_\_

#### **Part IV – 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 Well Owner or Agent

\_\_\_\_\_  
Date